UNITED NATIONS

# AFGHANISTAN

## Operation Salam
## Programme for 1992

Office for the Coordination of United Nations Humanitarian and
Economic Assistance Programmes relating to Afghanistan

UNITED NATIONS

# AFGHANISTAN

## Operation Salam
## Programme for 1992

UNOCA
November 1991

READEX FICHE

# Preface

Despite all the setbacks and discouragements, the pace of the process towards a political settlement of the question of Afghanistan has accelerated. The Secretary-General's statement of 21 May 1991 providing the elements which would serve as a good basis for a political settlement has gained the support of all the Governments concerned, as well as of the vast majority of the Afghan people and their leaders.

With the process towards a political settlement on the right track, it has become more urgent than ever that the international community sustain its efforts on the humanitarian front. Such assistance will not only help alleviate the suffering of the Afghan people, but also reinforce the peace process.

The Secretary-General has already welcomed the fact that in their joint statement in Moscow on 13 September 1991 announcing their agreement to cut off arms supplies to all Afghan sides, effective 1 January 1992, the Governments of the United States and the Union of Soviet Socialist Republics also reiterated their commitment to support the international humanitarian assistance effort to promote the prompt repatriation of refugees and the reconstruction of Afghanistan. The Secretary-General has appealed to all other Governments concerned to take similar decisions as a matter of urgency and not only halt the supply of arms but also cease financing their purchase. It is hoped that all Governments concerned would commit new resources not only for the immediate humanitarian assistance so desperately needed, but also to help the Afghan people with the rehabilitation and reconstruction of their devastated country.

The human dimension of 13 years of war has unfortunately not received its due attention. Some of the data in the present report are horrendous and heartbreaking. Once peace is attained, one of the most serious tasks the Afghan people will face is to reintegrate into normal life the thousands upon thousands of young and older people who have done nothing else - and know nothing else - but fight. The real challenge to the Afghan people now is surely not so much to win the war as the peace.

Benon V. Sevan

Personal Representative of the Secretary General
in Afghanistan and Pakistan

17 November 1991

# CONTENTS


Page

Introduction ..... 1

## Priority Sectors

Agriculture ..... 11
Food Aid ..... 17
Mine Clearance ..... 19
Health, Water Supply and Sanitation ..... 23
Basic Education ..... 35
Voluntary Repatriation ..... 41

## Specific Projects

Shelter ..... 47
Road Repair ..... 47
Services for the Disabled ..... 48
Women with Special Needs ..... 49
Children in Especially Difficult Circumstances ..... 49
Field Operations and Emergency Preparedness ..... 49
Culture ..... 50
English Language Training ..... 50
Management Training ..... 50

## Support Programmes

Logistics ..... 53
United Nations Radio Network ..... 54
Salam 01 Operations ..... 54
Data Collection ..... 54
United Nations Volunteers ..... 55
United Nations Presence in the Field ..... 55
Support for NGO Coordinating Activities ..... 56

## Issue Papers

The Community Development Worker - Animating the Community ..... 2
Women - Across the Divide ..... 4
The Disabled - To Live Life to the Full ..... 6
Drug Control - Opting Against Opium ..... 8
Environment - Nurturing Nature ..... 10

Map of Afghanistan ..... 52

## ANNEXES

Annex I. Mass Repatriation - A Challenge to the International Community .. 59
Annex II. Total Resource Requirements ..... 64
Annex III. Abbreviations ..... 66

# Introduction

This report describes a unique partnership between the people of Afghanistan and the United Nations system. It outlines a programme for the relief and rehabilitation of a war-ravaged country. It presents the human dimension of the Afghan problem alongside the raw data. It identifies key issues - the disabled, drugs, community development, women, and the environment - which cut across all the programmes and projects, and presents them in the Afghan context. It offers modest hope in the midst of despair.

This is not a shopping list for donors, nor is it a comprehensive programme for the rehabilitation of Afghanistan. It does not contain detailed project documents prepared by the United Nations agencies and programmes. Rather, it is an attempt to distil the lessons learnt by the United Nations system during three years of effort to assist Afghanistan. It outlines changes in approach and strategy and introduces the activities planned for 1992. It tries to define the problems, review experience in the field, describe the situation as the United Nations now sees it, and lay down the goals and objectives of United Nations agencies. The outline of the activities proposed by each agency is deliberately brief. If readers wish to know more of the detailed proposals of a specific agency, these can be made available by the agency concerned or the Office for the Coordination of United Nations Humanitarian and Economic Assistance Programmes relating to Afghanistan (UNOCA).

The priority sectors for United Nations activity in 1992 are the same as in 1991 - Agriculture, Food Aid, Mine Clearance, Health, Voluntary Repatriation - with the addition of Basic Education. These sectors have been chosen because of their link to basic survival needs. If people are to eat, Agriculture must be supported, and Food Aid provided. If mines are not cleared or marked, yet more Afghans will die or be maimed. Access to Health care is something almost all other societies now take for granted, and Basic Education teaches the skills for life without which improved standards of living are unlikely to be attained. Finally the right to return home voluntarily means little if one does not have the means to undertake the journey or to survive upon arrival.

This report has been prepared after a major programme review exercise held in October 1991, which brought together for the first time key staff of all the participating agencies of the United Nations system. It allowed an exchange of ideas not only between different agencies, but also between the staff of the same agency associated with different parts of the programme. In the period leading up to the meetings consultations were held with the non-governmental organisations (NGOs) and other implementing partners of the United Nations agencies. In the days immediately following the exercise further briefing sessions were held. In the workshops and plenary sessions of the meeting, United Nations staff reviewed the achievements of the past three years, identified the lessons learnt, analysed the situation which now confronts the international community in Afghanistan and agreed on a strategy and programme out-

# Animating the Community

In both rural and urban Afghanistan, communities traditionally make collective decisions through a *jirga*. The *jirga* is a meeting of elders, influential local people, religious leaders. Membership will vary according to the nature of the issue to be resolved. Some members may be elected, others not, some attend all *jirgas*, others irregularly. It will disband when its task is complete. The *jirga* has always been the locus of most decision-making affecting Afghans' lives. The war has only reinforced an existing pattern. Afghans' familiarity with this collective, targeted method of problem resolution provides a key to reconstruction.

The United Nations system increasingly relies on the ability of Afghan communities to create their own, specific structures to deal with specific problems. Partnerships with people sharing a common wish to improve the collective wellbeing have been found to be effective. Valuable human and material contributions are made by the community. Such arrangements, whether through the intermediary of an international or Afghan NGO, or directly through a United Nations implementing agency, are fully capable of identifying, formulating, managing and sustaining projects.

The process by which the partnership is built will vary according to circumstances. A representative will be selected to act as an intermediary with implementing agencies or NGOs, and as a facilitator or 'social animator' in the community. That person will be elected or appointed by a *jirga* or *shura* (council), and will often be chosen because of his technical or management skills.

At the beginning of the process, the community aspirations may require some definition, after which a plan of action can be drawn up. A strategy matching locally available resources with outside assistance is then developed by the implementing agency.

The advantages of working with communities and their representatives are many. Such structures encourage self-reliance, realistic expectations, efficient use of resources, broad participation, skills development, and continuity after the implementing agency has departed. And they provide an entry point for related programmes - for instance management training, or work for women or the disabled. Developing and extending the approach is a priority for the United Nations.

---

Band-i-Sardeh was a large state farm in Ghazni. The irrigation system needed maintenance and extension, and farm machinery was required to improve the farming methods and to extend and repair the road network. A large well-equipped workshop, as well as well-stocked stores of spare parts were available in Band-i-Sardeh. There was also an equipment park with hundreds of agricultural and earth-moving machines requiring repairs.

The farm has now been divided into farm lots of about 100 acres each. In discussions with the ILO, it was decided:

- the ILO would provide 15-20 people with technical, supervisory and administrative training, food and accommodation at Mohammed Kheil Training Centre. The community would pay transportation costs and stipends.

- the ILO would send trainers to Band-i-Sardeh and pay for their food and fuel. The community would provide accommodation and a vehicle.

- the ILO would provide hard tools, the community their transportation costs.

- the ILO would eventually withdraw, handing over full responsibility for development and training to the local struc-

lines for the future. The following paragraphs of the introduction and the sectoral chapters which succeed it set out the results of this unique cooperative exercise.

* * *

Even before it was plunged into 13 years of war, Afghanistan was one of the world's least developed countries. Meanwhile, in many parts of the world major technological advances in agriculture, education and health care have increased agricultural production, promoted literacy and reduced infant mortality. The Afghan people have not only missed out on these advances, but they have had to watch the destruction of what little they had. As the global goals set by the United Nations and the world community rise, the gap between the reality in Afghanistan and the goals becomes even wider. Graphics in the sections of this report on Agriculture, Health and Education show the enormity of the task.

The figures are not only a tragedy in themselves. They illustrate a steadily declining ability of the Afghan people to respond to the challenge of reconstruction and eventually development. If levels of illiteracy and basic education remain unchecked, the shortages of skilled manpower will become increasingly serious. If iodine deficiency spreads further, the number of cretins stretching the resources of society will rise steadily. If irrigation systems are not repaired and extended, Afghanistan will be less and less able to feed its growing population. These trends must be curbed and reversed. This report presents a modest strategy and programme which, alongside those of bilateral agencies and non-governmental organizations, is intended to help this process.

Over the past 13 years Afghans have been provided with huge amounts of military aid, in the form of equipment and cash or commodity funding. This aid has provided a basic but artificial livelihood for many Afghan families. Afghan refugees in neighbouring countries have received substantial amounts of humanitarian aid. Every year the Government of Pakistan distributes nearly half a million tons of food provided by international donors to Afghan refugees. Many refugees also have jobs in their host countries. With the current intensification of efforts towards a political settlement, refugees may start to return home in increased numbers. If they do, they will leave behind the security net of the refugee villages and - for a considerable period - swell the numbers of those in Afghanistan who do not produce what they need to survive. At the same time as major sources of income evaporate, the economy will come under the added strain of supporting returning refugees.

This basic understanding has influenced the design of the Programme for 1992 in two ways. First, it has prompted all the participating agencies to identify ways in which Afghan communities can help to meet the costs of the services they require; and secondly, it has led to the inclusion in the present report of an analysis of the response required to a possible mass return of refugees.

# Across the Divide

In Afghan society women seem to be invisible. Strict *purdah* means that many spend most of their lives inside the walls of their compound. Cultural norms place acute limits on their access to health services, education and training. Participation in these and other development opportunities is among the lowest in the world. Nine out of 10 are illiterate. Life expectancy, unusually lower than men's, is 42 years. On average, women bear seven live children.

Women have by no means escaped the destruction of war. An estimated 250,000 have been killed, 100,000 have been maimed, and 300,000 widowed. Some 80 per cent of refugees are women and children, as are most of the internally displaced. And the war has brought radical changes and strains. With family structures broken, menfolk killed or absent, Afghan women have taken on heavy additional burdens, inside and outside the household economy. Very often they now have sole responsibility for children and care of handicapped family members. Half a million children depend on widowed women.

The displaced must find a way of making a living. Women's participation in the Afghan economy is substantial and increasing. They have an enormous role to play in the rehabilitation both of rural and urban areas.

But the formidable social and cultural barriers blocking women's access to information, technical inputs and organisation have, equally, impeded efforts by United Nations agencies and NGOs to assist. Indeed, pre-war networks reaching rural women have weakened.

A concerted effort is now being made to integrate women and their needs in United Nations rehabilitation programmes. Alerting agencies and non-governmental organisations to their needs and potential is an important first step. Entry points will be identified and pilot schemes initiated. Vulnerable groups are to receive special attention. There will be special focus on the role of women in agriculture, education, vocational training and health programmes, making effective use of social animators. Women's access to the resources of United Nations agencies will thus be increased; the formation of groups of educated Afghan women will be promoted; women will be encouraged and helped as far as possible to enter income-generating activities; and practical and emotional support will be provided for families during the rehabilitation process.

---

Amina is 35 years old. She has six children; two others died immediately after birth. Her husband is a farmer. She is illiterate, as is her husband. Her two elder sons have rudimentary reading and writing skills. The other children, two girls, two boys, have not yet received any education, partly because there are no schools in the village, partly because the family disapproves of female education outside the home. Occasionally the educated sons show their mother and siblings how to read and write simple words from the Koran.

For some years Amina and her family have not had access to any medical care. The nearest clinic is remote, transport expensive and usually unavailable. Her village's health centre was destroyed by bombs. The same attack maimed her sister-in-law, a skilled carpet maker but unable to work because of the expense of materials. Since the war began the yields of the fields have gone down and they have lost both their cows and most of the goats. Amina has borrowed two chickens from a neighbour, and is now selling eggs. She plans to buy her own chickens, later a goat and a cow. She knows how to tend animals but would like to be more knowledgeable. She has seen the vegetables and fruit trees in a neighbouring compound, and would like the same, but seeds and seedlings are expensive.

As the movement towards a political settlement has gathered pace, the United Nations agencies have begun to refine their plans for responding to a possible large-scale repatriation of refugees. As is highlighted in the sectoral chapters on Agriculture, Food Aid and Mine Clearance, Afghanistan will not be able to absorb a sudden mass return of refugees without an immediate and substantial injection of assistance. Indeed it is to be hoped that Afghans will spread out the process of return over several years, allowing efforts to be focussed on areas of greatest need. To ensure that the United Nations system is as ready as it can be to respond to any mass return, the agencies involved in providing help to returning refugees, under the leadership of the Office of the United Nations High Commissioner for Refugees (UNHCR), are updating a detailed contingency plan. A first outline of this plan is presented in Annex 1 under the title "Mass Repatriation - A Challenge to the International Community".

* * *

The paramount need to promote self help has led to one major change in the approach of the United Nations system to rehabilitation work in Afghanistan for 1992. It is the shift from a "needs assessment" method, to one which is "demand driven". Instead of experts on mission assessing the needs of an area and designing projects to fit their analyses, Afghan communities are to be given responsibility for determining the priorities for their area and identifying the type of response they wish to make.

This theme of community initiative or community participation can be found in all the main sectoral chapters of this report. The extent to which Afghans have made clear their frustration and impatience with the "needs assessment" approach became clear during the programme review exercise. As a result, a significant change to the 1991 list of priority activities has been made for the 1992 Programme with the addition of Basic Education. Conventional wisdom had it that education was "too political" in Afghanistan. Colleagues who attended the World Conference on Education for All in Jomtien, Thailand in 1990 did not agree. They felt that the concept of Basic Education, with its emphasis on teaching skills for life in the community, had a sufficiently universal relevance that valuable work could be undertaken in Afghanistan without the difficulties which might confront a more conventional approach.

It is clear from early trials that this approach strikes a chord among Afghans, particularly in rural areas. The inputs required to get Basic Education off the ground are modest. If the community can identify a trusted individual as a "community representative" or "social animator" (another theme of this report), and others as teachers of life skills, these people will only need a modest degree of training and support, and some assistance with the supply of very basic materials and equipment. Clusters of such local initiatives can then be brought together into networks of like-minded groups, which

# To Live Life to the Full

Two million people, a number equivalent to one person in every seven or eight - or one person in every family - are disabled in Afghanistan. No less than 10 per cent of village people in Afghanistan were found to be disabled in a recent survey. One per cent of villagers had lost at least one limb, and nearly as many again had lost a hand, a foot, or part of a limb. An estimated 60,000 of the refugees in Pakistan are disabled; two per cent of all men were amputees in four camps surveyed. At least 50,000 Afghans have been provided with artificial limbs since the war started, and another 3,000 are waiting to get one.

The incidence of disability was high even before 1979,and it has increased dramatically during the war. Little in the way of advanced rehabilitation services has ever been available. The family, the locus of basic care, relied on whatever resources it could mobilise. Polio paralysis, blindness, congenital deformities and complications after infection were the most frequent disabilities. With the war the few existing health services collapsed, and measures that would have prevented disabilities such as polio immunisation decreased. Unlike most other developing countries, Afghanistan has had no opportunity to successfully expand such preventive programmes.

Practically all reports focus on clearly visible disabilities. Less conspicuous forms, including mental disabilities, are rarely reported. Women, confined by culture within the family, constitute together with children a majority of Afghans. Their invisibility is yet more pronounced if they are disabled. Women and children constitute a silent majority also among the disabled. A large proportion of those needing services are and will be women and children.

With mines and unexploded ordnance continuing to maim people long after fighting has stopped, the number is bound to grow. For as long as preventive action such as immunisation continues to lag behind need, many cases of polio myelitis will be added.

The International Committee of the Red Cross (ICRC), other non-governmental organisations and the United Nations system have been able to strengthen existing facilities and to establish a variety of new services for Afghans. While much of the provision up until recently has been located in neighbouring countries, services are being increasingly placed inside Afghanistan to provide access near to disabled people's homes.

Access to treatment is best at present for people engaged in military activities who are wounded while fighting. The Government or resistance political party usually pays for treatment. Others must find their own funds. Non-war-related and war-related civilian cases are therefore less likely to get appropriate treatment. This strikes women and children hard, especially in the poorer strata of society, and more so in areas without or far away from services. Few can afford the costs involved in treatment far from home.

The primary reason for assisting the disabled is the human right to access to appropriate treatment and to equality of opportunity to pursue active and gainful lives. Potentially they have much to contribute socially and economically to their families and society. There are now so many disabled Afghans that the traditional system of family responsibility cannot cope alone. Vigorous educational, vocational training and employment support is needed.

will increasingly be able to fulfil each others' needs. For example, one Basic Education Centre might concentrate on carpentry skills to make tables and chairs for their own and other communities; another Centre might specialise in vegetable gardening, and so on.

It was clear from the discussion among the staff of the United Nations agencies working in Afghanistan, and the subsequent exchange of views with the staff of NGOs, that the lessons learnt in the education sector are being learnt in very similar ways in other sectors. For example, in agriculture, farmers are increasingly being charged for inputs such as fertiliser which in earlier years might have been distributed free. The proceeds are ploughed back into the communities for purposes which they themselves identify. In demining, decisions about priority areas for demining are now taken on the basis of whether the affected community can fulfil a strict list of conditions, which include participation in the provision of support for the demining teams. Previously such decisions tended to be taken on the basis of a more abstract assessment by the project staff of which areas should be given priority. Even in its design of support for voluntary repatriation, the United Nations has moved away from an earlier concept which involved the preparation of group transport facilities to the idea of a cash grant, which the returning refugee can use in the way which seems most appropriate.

This Programme puts forward ideas which will have the effect of binding communities together and making them interdependent, in ways which they have perhaps never been before. These networks, in the long run, will have to be supported and nurtured by national and local government. Markets must be easily reached, roads must be kept up, books must be read and exchanged, medical specialists must be shared. The "social animator" will stress to his community leaders the need to keep open the lines of communication with neighbours if the full benefits of this kind of rehabilitation programme are to be sustained. Rehabilitation is not a shiny school building which lies empty except when the Ministry inspector visits, or a smart Health Centre with no medicines and no qualified staff. It is an approach to self-help which involves an awakening of the capacity of the community to respond to its own identified needs, with modest and realistic inputs from external sources.

* * *

It is clear that the rehabilitation process will continue in Afghanistan long after the conclusion of a political settlement. Three years' work and this programming exercise have shown that base-line data on which to plan a comprehensive rehabilitation strategy are often lacking. Considerations of security, logistics and access have often imposed limits on the ability of agencies to gather good data. However all the agencies participating in the United Nations effort now agree that the time is ripe for the preparation of a more comprehensive and detailed rehabilitation strategy for Afghanistan. It has therefore been decided that this work will be carried out

# Opting Against Opium

The United Nations International Drug Control Programme (UNDCP) estimate production of opium resin in Afghanistan in 1990 at over 2,000 MT. If true, this makes Afghanistan the largest producer of opium poppy in the world. Most of it is processed in inaccessible areas along the border between Afghanistan and Pakistan and smuggled out to the West through Pakistan or Iran. According to the latest international drug report, about 70 per cent of all heroin seized in Europe has its origin in Afghanistan and Pakistan. However, a significant and growing part of the production is consumed in Afghanistan and Pakistan. In both countries levels of addiction have risen alarmingly, with children becoming increasingly vulnerable. An estimate for 1988 made by WHO put the number of heroin addicts in Kabul at 5,000. One report estimates opium addiction in the province of Badakhshan in 1991 at 100,000 persons. UNDCP reports that children as young as 11 years old have been identified for treatment and detoxification in Afghanistan.

"Crop substitution", whereby producers pledge to discontinue production if provided with the means to introduce alternative high-value cash crops, has been successful elsewhere. But such programmes require a contract between an effective government - supported by international donors - and the opium producers. Delivery of the alternative resources to the farmers must be guaranteed, and vigilant enforcement ensured by the government. At the present time, conditions in Afghanistan are not ripe for such programmes.

In spite of this, opportunities do exist to bring about reductions in the level of production, and to tackle the growing problem of abuse. An overall strategy has been developed by the agencies and programmes of the United Nations system participating in Operation Salam, with the technical advice and funding support of UNDCP. The strategy is based on a double assumption: that Afghans are sensitive to teachings which prohibit trade in, and use of, drugs; and that they will therefore be ready to cease production of opium if alternative sources of income to feed their families are available. Experience backs this up. First, while production has increased dramatically during the war years, farmers invariably explain that it is due to the destruction of their traditional crops and the irrigation systems on which they depended. Second, there are well-documented instances where Afghan leaders have effectively halted production of opium poppy in their area, either in anticipation of international assistance or purely on the basis that such production is anathema to their religious beliefs.

This analysis has led to agreement to support three specific initiatives: first, assistance for the rehabilitation of rural infrastructure should be targeted at areas where evidence suggests that farmers are ready to revert to their pre-war crop production; second, material designed to stress the harmful consequences of drug production and abuse will be included in all Basic Education Programmes; and third, information about the identification and treatment of drug abusers will be integrated into programmes for the training of health workers. Details of these programmes are given in the sectoral chapters on Agriculture, Health and Basic Education.

in the spring of 1992, with funding provided by the United Nations Development Programme (UNDP).

The experience of cooperation under Operation Salam has shown that United Nations agencies are able to develop new approaches to work in order to adapt to a situation such as that in Afghanistan. Several agencies have developed unprecedented relationships with NGOs. Others have devised means of making their field staff operational, or of using United Nations Volunteers. Others have designed multi-sectoral projects which allow field staff to respond to a variety of needs expressed at community level, even though the programme as a whole is designed on a sectoral basis. Many of the United Nations agencies have had to stretch their mandates to the limits. In this context the role of NGOs in delivering assistance to the Afghan people, either on behalf of the United Nations, bilateral donors or on their own account, has been of vital importance.

In Afghanistan United Nations staff are working, alongside the Afghan people, under war conditions. Those stationed in Afghanistan are obliged to live without their families. Teams of United Nations staff have been kidnapped and beaten, shot at and bombed. One staff member injured in a bombing raid in September was flown out in the United Nations plane for hospital treatment, but insisted on flying back in October to review progress on the project he was working on. This illustrates some of the difficulties facing staff in carrying out their work.

As shown in Annex II to this report, the total cash requirement of the Programme for 1992 is US$133.7 million, together with 95,000 MT of food aid in the form of wheat. Of this amount US$39.6 million and 34,000 MT are available, leaving a shortfall of US$94.1 million and 61,000 MT of wheat. In the priority sectors the total cash requirement is for US$112.4 million of which US$33.7 million is available. As at 30th September 1991 US$43.9 million was available in the Afghanistan Emergency Trust Fund, of which the release was subject to approval by the donor. A further US$27.6 million had been pledged, but not yet received. Substantial in-kind contributions pledged to the Programme have also not been received. Some of these pledges were made as early as 1988.

# Nurturing Nature

War and its consequences, neglect and deprivation, have ravaged Afghanistan's natural resource base. Valuable old growth forests, plantations, rangelands, wildlife, and irrigation systems essential for productive land have been destroyed or seriously depleted.

Energy shortages have forced villagers in the north west to cut valuable pistachio wood for firewood. In the east, old-growth cedar, oak and pine has been felled and sold to foreign timber merchants. Much of the forest that is accessible has been cut down, then scrub brush torn up for fuel and for fodder. Reconstruction, especially the urgent rebuilding of homes by returning displaced people and refugees, has and will put unprecedented pressure on timber resources. Already forested areas, both natural and plantation, have declined rapidly, from an estimated 3.4 per cent to 2.6 per cent of land area. Overgrazing, by herdsmen unable to take livestock through mined areas, has done lasting damage to rangeland, putting in serious question its capacity to support increased livestock when returning refugees swell rural populations.

Erosion and desertification have occurred in many areas, in turn degrading watersheds, silting water courses and turning once productive land into wasteland. Essential irrigation systems have been destroyed by bombing or lack of manpower to maintain them: agricultural land has consequently degenerated. Large scale irrigation systems have caused excessive salinity and waterlogging of land, particularly in Helmand. Human and animal waste has polluted surface and ground water, presenting a major danger to the 96 per cent of rural people without a safe drinking water supply. Destruction of infrastructure, poor hygiene practices, inadequate solid waste management, lack of education, and the increase in squatter settlements has exacerbated the problem.

One of the pesticides (BHC) used in the north to eradicate Moroccan locusts is banned in all other countries because it is suspected of causing cancer in humans. Six thousand tons of the chemical remain in poor storage conditions. These agro-chemicals can have extremely grave consequences for water tables and the food chain. So too can uncontrolled effluents from small urban industries such as tanneries, smelters and automotive shops.

Field evidence suggests that the destruction of habitat and indiscriminate shooting may have rendered extinct or severely depleted world-renowned wildlife species such as the snow leopard, Marco Polo sheep and markhor, as well as rare migratory birds such as the Siberian crane and flamingo.

UNOCA's 1991 review of environmental management conditions has provided the basis for remedial environmental measures. More attention will be focused on sound environmental management in the rehabilitation of Afghanistan, including the critical role of women as primary users and managers of natural resources. FAO programmes will include essential community and agro-forestry projects, as do non-governmental organisations (NGO) with their community forestry programmes in eastern provinces. Land resource maps using remote-sensing technology are being prepared by FAO to provide valuable baseline data on the current status of the natural resource base. UNDP have established an alternative energy project focusing on the development of solar energy, biomass potential and micro-hydro. UNCHS shelter and reconstruction projects use alternatives to wood as construction materials. Two NGOs in Peshawar have projects developing improved stoves, solar cookers, and compressed brick technology.

NGOs provide training programmes in Afghanistan for plant protection workers in the safe application of agro-chemicals, and WHO and UNICEF projects address environmental and health aspects of water pollution and sanitation.

# Agriculture

Over the past 13 years the area under cultivation in Afghanistan has shrunk by roughly 40 per cent. United Nations agencies estimate, on the basis of declining cereal production results and observation of damaged or abandoned water courses and canals, that the area under irrigation has fallen from around 1.3 million hectares to less than one million. Damage and deterioration of the physical infrastructure is awesome. Overall output of food grains has fallen by over one-third. Seed grain quality has degenerated and the incidence of fungal diseases increased. Sunn pest *(pentatomadae)* and locust have caused severe damage to wheat crops. Unit yields have declined sharply. A high incidence of disease and pests have reduced the supply of fruit and vegetables. Cotton production has dropped by more than 50 per cent. Livestock herds have fallen by more than 50 per cent. Meat and milk availability, draught power, and exports of wool, karakul and carpets have consequently fallen dramatically. Some 250,000 hectares of forest, 13 per cent of the total, have disappeared. More accessible areas have lost most. In rural areas there is an acute shortage of firewood for cooking and heating. Throughout the country there is a shortage of timber for construction. There are extremely worrying long-term implications for the environment, in particular erosion and loss of water-holding capacity.

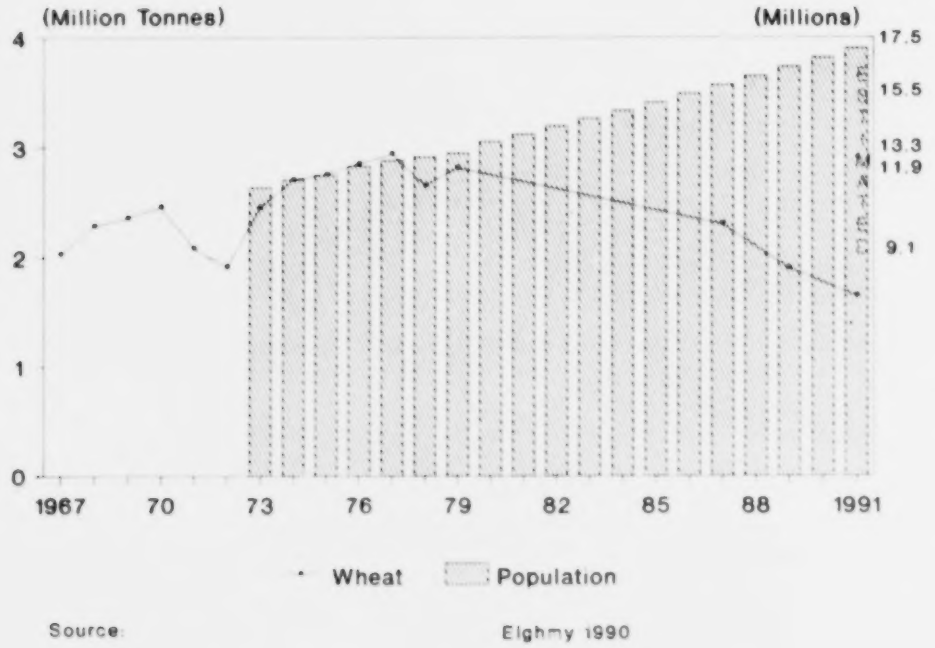
In the past three years much effective work has been done in areas both under Government of Afghanistan and resistance control to demonstrate effective rehabilitation methods. The United Nations, with its special capacity and relative freedom to work in all parts of Afghanistan, has shown that agricultural rehabilitation can succeed in present conditions. In areas where government services are lacking and even in support of government services, NGOs, properly supported with funds and technical back-up, can be effective implementing partners. Some 50 NGOs, both Afghan and international, have been implementing projects inside Afghanistan. More activities could be undertaken if sufficient funds were available.

Over the two seasons 1989/91 an estimated 7,500 MT of wheat seed of improved variety, together with DAP and Urea fertilizer, have been distributed in eastern and southern Afghanistan, and an estimated 5,000 MT of wheat seed in the north. Between 125,000 and 150,000 farming families have received seed under these programmes in 20 out of the 29 provinces. With an expected average increase in yield of approximately one MT per hectare these programmes are conservatively estimated to have produced an additional 90,000 MT of grain and seed. The improved maize projects have distributed 250 MT of selected seed covering approximately 16,500 ha and benefitting an estimated 17,000 farming families.

A total of 630,000 budded fruit trees, 35,000 apple root stocks and 100,000 poplar cuttings have been planted. Nurseries for plantation trees have been established in Balkh, Faizabad, Kabul and Samangan. Other forestry rehabilitation activities have to date concentrated on the propagation of poplar cuttings of selected varieties. In 1990 a total of 100,000 cuttings were provided to nurseries in Ghazni, Kunar and Paktia for rooting, propagation and eventual distribution.

Over 250 NGO Afghan agricultural field technicians and management staff have been provided with in-service training, including in crops and seed production, plant protection, crop data collection, orchard

## WHEAT PRODUCTION AND TOTAL POPULATION




Source: Elghmy 1990

and nursery management and practice, project document preparation and reporting. Approximately 20,000 farmers have received at least some extension training in improved crop production.

A total of 12 NGOs have delivered animal health services to 125 districts in 12 provinces, and have vaccinated two million animals and provided treatment to nearly one million more. In the process, 63 paravets and 506 vaccinators have been trained.

The agricultural rehabilitation strategy of United Nations agencies and their NGO partners is to restore basic self-sufficiency. It has two dimensions: rehabilitation of the resource base to meet the needs of the current population; and, eventually, the provision of basic inputs to meet the needs of returning refugees.

The main thrust of the agriculture rehabilitation programme remains the provision of essential agricultural inputs - high quality seed of improved varieties of wheat, maize and to a lesser extent other crops, together with fertilizer (DAP and Urea), budded fruit tree saplings and rootstocks, tree cuttings and seeds for propagation in nurseries, farm power, tools and implements. These inputs are supplied as a package which includes in-service training, technical advice, and transportation coverage. Women's access to inputs, including fruit saplings, vegetable seeds, fertilizers, pesticides and breeding stock for poultry is part of the package.

The importance of the role played by Afghan women in agriculture is unquestionable. Maximizing their contribution is more problematic. Surveys on the tradi-

tional agricultural tasks performed by women in various regions will help to ensure that projects are designed in ways which reflect their needs.

In the coming years programmes will be concentrated in areas where rehabilitation can achieve the best results. The United Nations agencies will choose as implementing partners the organisations with the greatest capacity locally. The facilities of neighbouring countries will continue to be used for the production of high quality seed, budded fruit trees, saplings and other agricultural inputs. There will, however, be a steady shift towards local Afghan self-sufficiency through the development in Afghanistan of on-farm seed production and strategically-placed tree nurseries. Training for women in kitchen gardening, use of fertilisers and pesticides, food storage and food processing techniques, grafting and budding of fruit trees will also be emphasised.

The agriculture rehabilitation strategy of the United Nations system is guided by the field experience gained in the past three years and the May/June 1991 evaluation of United Nations Development Programme/Office for Project Services (UNDP/OPS) rural rehabilitation work. For example, experience has shown that a village-based, privatised veterinary service with a Basic Veterinary Worker (BVW) supported by mid-level and professional veterinary personnel at the district and provincial levels is appropriate. The privatisation of veterinary services will reduce the financial burden of any forthcoming government.

Fresh and dried fruit have traditionally been important village products both for home consumption and cash sale. Up to 1979 exports of dried fruit, primarily raisins and dried apricots, were earning some 30 per cent of Afghanistan's foreign exchange. The rehabilitation programme provides high-quality budded saplings purchased from selected nurseries in Pakistan, rootstocks (mainly apple), stone fruit seed and bud wood for nurseries which are supported by NGOs.

Forestry programmes will focus on village plantations for timber (poplars), fuel, forage and amenity; and management and preservation of wild forests, augmented by strategic planting for watershed protection and stabilisation of sand dunes and erosion. These forestry efforts contribute to environmental support.

Plagues of Moroccan locusts and sunn pest over recent years have decimated wheat crops in the northern areas. Since 1991 the sunn pest and locust programme has been a major inter-agency activity involving UNDP/OPS, Food and Agriculture Organisation (FAO) and UNOCA, supported in the field in northern Afghanistan by four NGOs. The total cost amounts to some $2 million. While results of the campaign will not be evident until the spring of 1992, it is possible that over 250,000 MT of wheat have been saved. The campaign showed that crop losses can be successfully minimised at the village level. However, environmental concerns will be given a high priority as chemicals are re-introduced in farming systems. The absence over the past decade of large-scale chemical control of insects, pests and diseases means effective integrated plant protection procedures can begin with little chemical contamination.

After an extensive review of agricultural programmes by United Nations agencies in October 1991, the following goals, objectives and programme components were defined for the 1992 Programme.

## PROGRAMME COMPONENTS

### Goals

- To increase agricultural production - particularly of basic food grains, fresh fruit, vegetables, meat, poultry, and dairy products to meet domestic requirements.
- To revive and restore the production of cash crops and agro-industrial exports, such as cotton, fresh and dried fruits, (raisins etc) nuts, wool and skins to earn foreign exchange.

### Objectives

- To provide improved seed wheat responsive to fertiliser to replace wheat degenerated by over a decade of neglect.
- To rebuild livestock herds and poultry stocks, especially to provide animal protein to supplement the cereal-dominated diet.
- To re-establish orchards and vineyards damaged or destroyed by war.
- To utilize plant protection techniques, both chemical and natural, to save crops produced.
- To begin the process of the reconstruction of agricultural infrastructure, especially irrigation systems (surface and kareze) and forestry replanting.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| FAO | 4380 | 1578 | 2802 |
| UNDP/OPS | 5667 | 317 | 5350 |
| UNDCP | 66 | 66 | |
| Total | 10113 | 1961 | 8152 |

### 1. Food Crop Production Packages

Objective

To provide production packages of improved seeds, fertiliser and other necessary inputs.

Activities

Distribute 3,000 MT of improved seed with appropriate amounts of fertiliser, based on three years' successful field operations. Introduce high-quality, locally-tested improved seeds, especially wheat. Improve the genetic quality of seeds. Packages include transportation, on-site training and subsequent monitoring visits. Train women in use and risks of fertilisers, chemically-treated seeds and water and chemicals-contaminated fuel.

### 2. Livestock Health

Objective

To provide livestock health services for herds and flocks, and training to veterinary field units.

Activities

Provide the services of intensively-trained veterinary field units, typically consisting of one veterinarian, 2-4 paravets and 5-10 village Basic

Veterinarian Workers (BVWs) in 150 districts of 13 provinces (Bamyan, Baghlan, Ghazni, Helmand, Kabul, Kunar, Kunduz, Logar, Nangarhar, Paktika, Paktia, Kandahar and Wardak). BVWs to apply preventive medicine, particularly vaccination, against anthrax and enterotoxemia, supply anthelmintics for external parasites in sheep and goats and provide similar treatment for blackquarter, haemorrhagia septicaemia and internal parasites in cattle. Rehabilitate 40 clinics in the southern part of the country and 39 in the northern areas. Train women in basic animal care and hygiene, vaccination of chickens and disease identification.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| FAO, UNDP/OPS | 7905 | 630 | 7275 |
| UNDCP | 116 | 116 | |
| Total | 8021 | 746 | 7275 |

## 3. Fruit Trees, Orchards and Vineyards

Objective

To provide limited replacement saplings to start the rehabilitation process for orchards and vineyards.

Activities

Provide 300,000 budded saplings for family orchards and possibly 20,000 rootstocks for newly-established nurseries.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| FAO | 218 | 218 | |

## 4. Forestry

Objectives

To begin the process of reforestation and production of wood for domestic uses.

Activities

Continue present activities but diversify into other amenity and plantation trees. Run appropriate training courses.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| FAO | 1718 | 1415 | 303 |
| UNDCP | 20 | 20 | |
| Total | 1738 | 1435 | 303 |

## 5. Plant Protection

Objectives

To control sunn pest *(pentatomadae)* and Moroccan locust in wheat and begin systematic integrated plant protection procedures.

Activities

Implement Phase III of the Crop Protection Project. Initiate an Integrated Plant Protection Programme.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| FAO | 1692 | 500 | 1192 |

## 6. Agriculture Reconstruction (mainly Irrigation)

Objectives/Activities

Rehabilitate or reconstruct village irrigation systems - canals, water courses, karezes and simple structures. Rehabilitation other essential agricultural facilities, such as community raisin drying houses, stores, nurseries for fruit and forest trees and vegetables seedlings.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| FAO | 1646 | 1646 | |
| UNDCP | 666 | 666 | |
| UNDP/OPS | 6123 | | 6123 |
| Total | 8435 | 2312 | 6123 |

## 7. Other Projects

In addition to the above programme components which derive their priority status from basic needs and experience gained so far in the rehabilitation process, there is a group of agriculture projects and activities which are already under way. These are: poultry production; research, training and extension services; remote sensing for agriculture; and assistance to the Agricultural Development Bank of Afghanistan.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| Total | 3644 | 3099 | 545 |

RESOURCE REQUIREMENTS FOR AGRICULTURE

| S/No | Programme Components | Executing Agency | (In thousands of US$) Budget | Available | Shortfall |
|---|---|---|---|---|---|
| 1. | Food Crop Production | FAO,UNDP/OPS, UNDCP | 10,113 | 1,961 | 8,152 |
| 2. | Livestock Health | FAO, UNDCP | 8,021 | 746 | 7,275 |
| 3. | Fruit Trees, Orchards and Vineyards | FAO | 218 | 218 | - |
| 4. | Forestry | FAO, UNDCP | 1,738 | 1,435 | 303 |
| 5. | Plant Protection | FAO | 1,692 | 500 | 1,192 |
| 6. | Agriculture Reconstruction | FAO, UNDCP, UNDP/OPS | 8,435 | 2,312 | 6,123 |
| 7. | Other Projects | | 3,644 | 3,099 | 545 |
| | | GRAND TOTAL | 33,861 | 10,271 | 23,590 |

*In the middle of a field of improved wheat near Ghazni, 50 holes had been dug in regular rows. When asked why, the farmer replied that he had heard about the United Nations programme contributing fruit tree saplings to Afghanistan. He wanted his land to be ready. Told that the programme had no more trees for this year, he responded "But I have plenty of time. Next year then." He and others will get their fruit trees in 1992.*

# Food Aid

In spite of the war, there has been no mass starvation in Afghanistan. Some parts of the country, however, have experienced very severe food shortages in recent winters. Consequently prices of food staples have risen very sharply, and real hardship resulted. Worst hit have been remote areas of the northern and central provinces, and particularly those which have been affected by locust and sunn pest infestations, or by floods which have washed away the season's harvest.

Official figures show a continuing decline in national wheat production, from 2.3 million MT in 1987 to 1.9 million MT in 1989 and 1.65 million MT in 1991. At the same time official food imports have declined from about 350,000 MT in 1985 to 210,000 MT in 1990. This conjunction has created a growing wheat/flour deficit, which has been estimated at between 200,000 MT and 650,000 MT, with 400,000 MT a reasonable compromise figure. The deficit is primarily made up by unofficial imports of wheat from Pakistan. Although this supply has removed the danger of mass starvation - and indeed has demonstrated the vitality of the private commercial and transport sectors in Afghanistan - prices tend to rise the longer or more difficult is the supply route from the Pakistan border, and as a result of transport difficulties in winter. A great many Afghans, and especially the poor, undergo severe hardship. Their number is likely to increase in the years following any peace settlement as cash income associated with the war quickly dries up. The problems will be compounded when, as seems likely, mass repatriation follows a peace settlement. For example, the return of a million refugees would require an additional 216,000 MT of wheat annually. It will take many years before returning refugees will be able to produce enough food to feed themselves.

*"You never see Afghans cry", said a UN food aid worker. But he had, once. "It was in 1990, winter in Badakhshan, deep snow. The family was crouched inside a stone house, the children with their feet in the ash of an old fire to keep warm. No shoes, only cloth shirts and dresses. One girl was standing up away from the fire, convulsing, going blue, chattering to herself. The man was crying. He couldn't feed his family."*

The outlook on food availability and prices for the winter of 1991-92 and the following year is clouded both by persistent effects of the severe flooding in the early months of 1991 which reduced production substantially in several key growing areas, particularly in the southwest, and by uncertainty over the continuation of supplies from bilateral donors. In all probability, therefore, substantial quantities of food aid from the international community will be required.

In 1989 and 1990 World Food Programme's (WFP) food aid programme included a substantial component of distribution of food to vulnerable groups in eastern and southern provinces, as well as the UNOCA/WFP Food-for-Bazaar scheme in the north. During 1991 these programmes have been almost entirely replaced by WFP Food-for-Work projects in support of rehabilitation. This policy will continue in 1992. Food-for-Work is a major component of many of the sectoral programmes described elsewhere in this report.

## PROGRAMME COMPONENTS

### Objectives

- To support rehabilitation programmes within Afghanistan through the supply of food commodities.
- To maintain preparedness for possible emergencies, especially large scale refugee return.

### Food Aid

Activities

Preposition 45,000 MT of wheat for south and east Afghanistan, sufficient to support 1 million returnees for three months. Preposition 50,000 MT in north Afghanistan to provide emergency supplies for 1 million people for four months. Use the prepositioned stocks to support rehabilitation projects in all parts of the country through Food-for-Work, in coordination with other United Nations agencies.

| FOOD AID REQUIREMENTS | | | | |
|---|---|---|---|---|
| | Executing Agency | (in metric tonnes) | | |
| | | Total | Available | Shortfall |
| Wheat | WFP | 95,000 | 34,000 | 61,000 |
| Oil | WFP | 610 | 610 | - |
| | GRAND TOTAL | 95,610 | 34,610 | 61,000 |

| CASH REQUIREMENTS | | | | |
|---|---|---|---|---|
| S/No Programme Components | Executing Agency | (in thousands of US$) | | |
| | | Budget | Available | Shortfall |
| 1. ITSH | | | | |
| (1) WFP (ARRO/UNILOG) | WFP | 5,727 | 2,100 | 3,627 |
| (2) WFP/LUNA | WFP | 5,000 | 1,500 | 3,500 |
| 2. Construction of WFP warehouses (Mazar-i-Sharif) | WFP | 800 | 300 | 500 |
| 3. Monitoring and Programme Support | | | | |
| (1) WFP (ARRO/UNILOG) | WFP | 1,160 | 1,160 | - |
| (2) WFP/LUNA | WFP | 1,500 | 1,100 | 400 |
| | GRAND TOTAL | 14,187 | 6,160 | 8,027 |

# Mine Clearance

About 10 million mines are thought to have been laid in Afghanistan. They have been dropped randomly from the air, laid in concentrated clusters and minefields, laid singly and as booby-traps. Often they are washed down by floods on to previously cleared land. In some areas they are everywhere, in villages, gardens, tracks, fields. In others they may be only on access roads. There are large quantities of unexploded ordnance in almost all the areas where intensive fighting has taken place. Information on the locations, concentrations and types of mines is acquired slowly and often tragically. The problem tends to be worst in provinces bordering Pakistan, and in areas where fighting was heaviest.

Surveys carried out in Kunar, Logar and Paktika suggest that 20 per cent of disabled people are victims of mines or unexploded ordnance. If this is true for the country as a whole, about 400,000 people will have been disabled in this way. Nobody can be sure how many people have been killed by mines, but a figure of 200,000 may be realistic. They remain a peculiarly horrifying hazard to Afghans going about their daily lives - hidden, unpredictable, unaccountable, indiscriminate of men, women or children. They have also wreaked havoc in the livelihoods of Afghans. The Swedish Committee Agricultural Survey has estimated that mines have killed 500,000 farm animals and destroyed as many as 2,000 vehicles. Agricultural, market and transport activities have been all but halted in many areas.

The United Nations has supported mine clearance carried out by two Afghan NGOs since early 1990. Afghan Technical Consultants (ATC) works in eastern and central Afghanistan, and the South West Afghan Agency for Demining (SWAAD) in southern and western Afghanistan. The Hazardous Area Life Support (HALO) Trust began operations in 1991 in parts of northern Afghanistan. A number of site offices have been established to provide support, including accommodation and coordination of activities with local *shuras* (councils) and authorities.

Mine clearance operations are carried out manually, mechanically and with specially trained dogs. ATC and SWAAD operate a total of 30 manual demining teams, each consisting at present of 27 members. Manual demining is laborious and painfully slow. ATC has established a Mechanical Mine Clearance Unit (MMCU) which uses mine flails to speed up the clearance of mines and to make demining operations safer. During the first ten months of 1991, the three implementing NGOs had cleared tracks, roads and farming land with a total area of 6.92 sq km.

Operational planning is supported by the Mine Clearance Planning Agency (MCPA), which in 1991 carried out mine surveys and minefield mapping in the provinces of Badakhshan, Ghazni, Kandahar, Paktia, Paktika and Zabul, covering an area of 10.63 sq km of grazing land, 33.8 sq km of agricultural land and 263.4 kms of roads. So far 28 minefield records have been obtained from the Government of Afghanistan.

During 1991 the emphasis of the Mine Awareness Programme implementation was shifted from the refugee camps in Pakistan to Afghanistan. To date it has benefitted 650,381 men and 102,423 women, in the provinces of Helmand, Kan-

dahar, Kunar, Nangarhar, Paktia, Paktika and Zabul. The programme has been implemented by an Afghan NGO, the Organization for Mine Awareness (OMA). The Afghan Red Crescent Society (ARCS) is soon to initiate its own project, operating out of Kabul.

Field experience suggests that clearing mines and unexploded ordnance from affected primary routes, commercial and agricultural land - amounting to a total of two per cent of Afghanistan's land area - would be sufficient to allow social and economic activity to revive. The remainder of the mined areas could be marked for later demining or permanent abandonment. This approach has been successful in the Falkland Islands/Malvinas and elsewhere.

An independent evaluation of the programme was completed in July 1991. Many of its recommendations have been incorporated in the Programme for 1992. Mine clearance and mine awareness activities will be concentrated in areas of priority rehabilitation activity. Programmes will be closely coordinated with United Nations agencies engaged in these activities.

Operations will be maintained at present levels. Areas for demining will be strictly selected on criteria of security, the level of danger to populations, and the predicted economic and social benefits. Great care will be taken that local community representatives are united in their desire for the demining. No militarily significant access road will be cleared.

Mine detection dogs trained under a bilateral programme are to be incorporated in the manual demining teams. Field Medical Units will be attached to teams. Control of operations will be transferred to regional managers in Kabul, Peshawar, Quetta and Tehran; surveying and monitoring will be directly supervised by the Programme Manager.

*When UNOCA mine clearance teams arrived, the town of Urgun in Paktia Province had four shops. Two months later, 54 shops had sprung up in the bazaar area.*

# PROGRAMME COMPONENTS

## Goal

° To remove mines and other explosives endangering lives and preventing rehabilitation.

### 1. Mine Clearance Programme (MCP)

Objective

To clear mines and unexploded ordnance.

Activities

Carry out mine clearance with 27 teams of 32 persons each. Restructure and reequip Medical Teams and incorporate into ATC and SWAAD. Establish the first 8 Field Medical Units, each with four beds, a doctor, two paramedics and an ambulance and driver.

Transfer mine detection dogs to ATC, allowing closer cooperation between manual teams and the dogs. Train and assist Afghan staff in the operation of mechanical mine clearing.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNOCA Manual | 9700 | 1400 | 8300 |
| UNOCA MMCU | 400 | 100 | 300 |
| Total | 10100 | 1500 | 8600 |

### 2. Mine Awareness Programme (MAP)

Objective

To teach Afghan men and women in mine-affected areas of Afghanistan, and refugees, how to detect, identify and avoid mines.

Activities

Concentrate MAP in Afghanistan. Extend to the urban population in Afghanistan, and to the refugee population in Iran. Integrate into other education programmes by the end of 1992.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNOCA | 1800 | 300 | 1500 |

### 3. Mine Clearance Training (MCT)

Objectives

To train Afghan volunteers in the basic skills required to conduct mine clearance operations, and provide specialist training for selected volunteers to work as team leaders or instructors.

Activities

Train sufficient deminers to fill vacancies in the existing teams, and conduct continuation and refresher courses. Transfer training emphasis from Risalpur, Pakistan, to field training in Afghanistan. Continue to build up refresher courses in Afghanistan. Utilise new expert foreign instructors anticipated in 1992.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNOCA | 1400 | 300 | 1100 |

### 4. Planning, Survey and Monitoring Programme

Objectives

To survey and map areas affected by mines and disseminate technical data, and to monitor and

report on the destruction of mines and unexploded ordnance.

Activities

Carry out a country survey. Make efforts to obtain additional minefield records from the Government of Afghanistan. Develop the data base system and improve the methods of gathering information. Link demining headquarters data.

Integrate and coordinate with MCP. Assign survey teams to the demining NGOs. Centralise information gathering, planning and monitoring functions in Demining Headquarters.

Manage and coordinate the programme, with the participation of regional manager in Kabul, Peshawar and Quetta.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNOCA | 2300 | 600 | 1700 |

RESOURCE REQUIREMENTS FOR MINE CLEARANCE

| S/No | Programme Component | Executing Agency | (In thousands of US$) Budget | Available | Shortfall |
|---|---|---|---|---|---|
| 1. | Mine Clearance Programme (MCP) | UNOCA | 10,100 | 1,500 | 8,600 |
| 2. | Mine Awareness Programme (MAP) | UNOCA | 1,800 | 300 | 1,500 |
| 3. | Mine Clearance Training (MCT) | UNOCA | 1 400 | 300 | 1,100 |
| 4. | Planning, Survey and Monitoring Programme | UNOCA | 2,300 | 600 | 1,700 |
| | | GRAND TOTAL | 15,600 | 2,700 | 12,900 |

# Health, Water Supply and Sanitation

## Health

In the 1970s the health indicators on the situation of children and women in Afghanistan ranked the country among the worst in the world. By the 1990s the situation has changed little. Afghanistan has been isolated from the technical advances and innovations that have begun to change the situation of children and women elsewhere. War has complicated the implementation of new programmes and has further reduced the access to health care for many Afghans.

Endemic diseases like diarrhoea, pneumonia, malaria, leprosy, tuberculosis and trachoma continue to take a heavy toll, especially among the children and women, as well as draining the energy and income of the already impoverished population. Infant mortality remains amongst the highest in Asia and in the world at 169 per thousand with the lowest life expectancy rate (40.5 to 42 years)*. Maternal mortality claims the lives of 690 women per 100,000 deliveries. This reflects the substantially reduced access of women to the services of society. United Nations Population Fund (UNFPA) reports that 21 per cent of all pregnancies are wasted. The under five mortality rate is 298 per thousand*.

Diarrhoea, acute respiratory infections, measles and neo-natal tetanus complicated by malnutrition are the principal causes of death among infants, children and women. Data from the Indira Gandhi Institute of Child Health in Kabul for children 0-14 indicates that 35 per cent of admissions are for diarrhoeal disorders. The NGO, Management Services for Health (MSH) found that diarrhoea and dysentery constituted 32 per cent of the diagnoses made by cross-border health workers. Acute respiratory infections are identified as widespread and serious among all groups of Afghans. At the Indira Gandhi Institute of Child Health, 17 per cent of admissions for children 0-14 were for acute respiratory infections. In 1978 WHO estimated the incidence of upper respiratory infections among children under three in greater Kabul to be 32 per cent. Together with infectious and parasitic diseases, respiratory system disorders comprised nearly half (47.65 per cent) of all clinic visits in rural Afghanistan (Coordination of Medical Committees (CMC) 1990).

Missions by staff of NGOs and United Nations agencies report increases in the incidence of measles, polio, whooping cough, malaria and tuberculosis. In 1989 United Nations Children's Fund (UNICEF) estimated an incidence rate of 13.5 per cent for measles and 0.6 per cent for polio in children under five. Before the war the disability rate in Afghanistan was the same as for other developing countries. Now, as a result of the war, more than two million Afghans of all ages are estimated to be disabled. Those maimed by war are estimated to number 300,000, of whom 100,000 are women.

Poppy growth and heroin production has reached alarming levels. There is evidence of increasing drug abuse especially among women, youngsters and children. UNDCP

* *Note: Vital statistics are treated with caution by the United Nations system but give a broad indication of the scale of the problems.*

reports that children as young as 11 years old have been identified by health workers for treatment and detoxification.

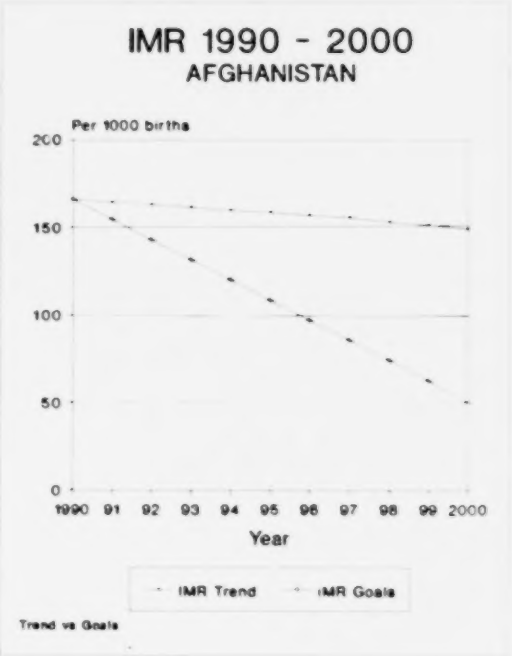
Against this bleak backdrop, UNICEF and World Health Organisation (WHO), together with their NGO partners have carried out programmes in both urban and rural areas. In several areas access to the population has been limited by war. In addition, mines, climatic conditions, lack of trained health workers, communications problems and an almost totally ruined health infrastructure have been among the major obstacles encountered in the implementation of projects.

Major areas of activity have included Maternal and Child Health (MCH), Control of Diarrhoeal Diseases (CDD), Expanded Programme of Immunisation (EPI), control of malaria and leprosy, rehabilitation of disabled Afghans, action on iodine deficiency, supply of essential drugs and micronutrients, rehabilitation of health infrastructure including water and sanitation and health manpower development. WHO has developed a health information system to identify the health infrastructures and trained manpower available. This project is also preparing health profiles of provinces.

Since 1989 a high degree of priority has been accorded to EPI by UNICEF and its NGO partners, with technical support from WHO. During 1990 some 200,000 children under one and 239,000 women were fully vaccinated against six major diseases and tetanus toxoid respectively.

Rehabilitation of war wounded has been carried out at a modest scale by NGOs, the International Committee of the Red Cross (ICRC) and Government institutions with support from WHO. Data suggest that some 50,000 Afghans have been provided with artificial limbs.

Both the Government of Afghanistan and the Afghan resistance have expressed a strong commitment to alleviate the health problems and improve the conditions of the Afghan people, especially women and children, through a Health Master Plan prepared under the auspices of WHO.



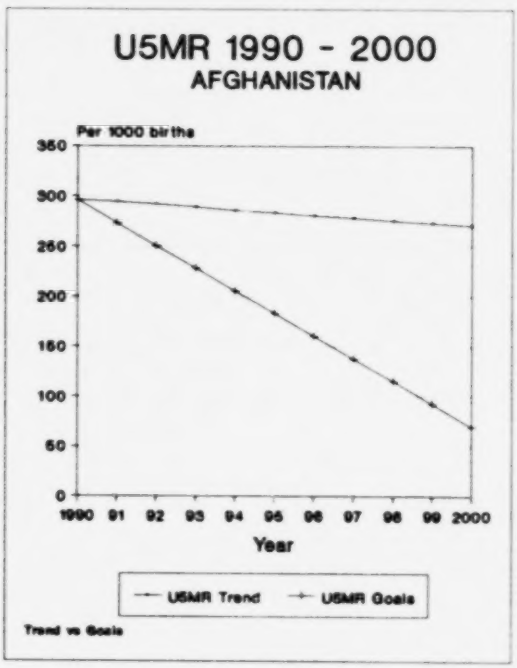

*Currently estimated at 169 per thousand, Afghanistan's infant mortality rate, if left unchecked, will drop to 150 per thousand by the year 2000. To conform to world goals by that date, the country should reduce its IMR by 12 points a year – an almost impossible task.*

For three years UNICEF has carried out special health protection programme during the winter seasons in accessible areas of the 11 central and northern provinces of Badakhshan, Badghis, Baghlan, Balkh, Faryab, Herat, Kabul, Kapisa, Kunduz, Jowzjan and Samangan where climatic conditions are harsh. In the 1990/91 winter 280,000 children were reached. The programme was prepared in close collaboration with community leaders, whose contribution guaranteed the effectiveness of the programme. Some NGOs are experimenting with employment of couples as vaccinators to increase tetanus toxoid coverage of women population.

These experiences and others like it have led United Nations agencies and NGOs to place increased emphasis on community participation and on building up the capacity of communities to assume responsibility for the identification of needs and generate a commitment to the goals of the programme.

In 1992 United Nations agencies and NGOs will continue to support services in MCH, EPI, CDD, Acute Respiratory Infections (ARI), nutrition and water and sanitation. Emphasis will be put on training and manpower development to remedy dramatic shortages of trained staff. Support will be given to the reinforcement of health infrastructure and systems. United Nations agencies will try to increase their access in order to make basic services available, especially to the vulnerable population of provinces where major activities are under way.

These priorities have been identified during a major programme review exercise carried out in October 1991 which brought together key professional staff from UNICEF, WHO, UNFPA and other United Nations agencies working in the health sector. Participants acknowledged the enormity of the tasks facing the Afghan people in the health sector and recognised that the contribution of the United Nations system with support from NGOs was bound to be modest. Even this level of contribution, however, depends on obtaining total funding support for the programmes outlined below.




*The under five mortality is at present 298 per thousand. The goal is to bring this rate down to 75 per thousand by the year 2000.*

## PROGRAMME COMPONENTS

### Goal

- To maintain and enhance the health of Afghan people with particular emphasis on vulnerable groups.

### Objectives

- To reduce infant and child mortality and morbidity, to reduce maternal mortality and achieve improvement of maternal health, to promote child-spacing, and to reduce child malnutrition.
- To improve access to safe drinking water and sanitation facilities.
- To promote the social, economic and medical conditions of Afghans with a disability, whatever its type or cause.
- To reduce the incidence of major epidemic diseases.

### 1. Primary Health Care (PHC)/Maternal and Child Health (MCH)/ Family Planning (FP)

Objectives

To increase access of women and children to primary health care services in the provinces accessible to United Nations agencies and to improve the quality of services offered by existing health systems, especially to the most disadvantaged. 1,500,000 women and children are targeted to be reached by various primary health care interventions in 1992. Special emphasis will be placed on child-spacing practices among Afghan women of reproductive age.

Activities

Train 2,250 health center and primary health care staff, traditional birth attendants and community leaders or social animators. Repair and reactivate through community participation 50 health centers in urban and rural Afghanistan; research and survey infant and maternal mortality rates; monitor and evaluate activities. Emphasis will be placed on ante-natal care, safe delivery, post-natal care and management of high risk pregnancies. Maternity and Children's Hospitals will be supported to provide referral to ante-natal and neo-natal services.

Establish a model approach to increase contraceptive practice rate by about 5% in the Kabul area initially, then in other areas.

Provide family welfare guidance at the grass roots level with an estimated 95 family health workers and 300 volunteers.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNICEF | 1833 | 650 | 1183 |
| WHO | 1457 | 1204 | 253 |
| UNFPA | 410 | 200 | 210 |
| Total | 3700 | 2054 | 1646 |

### 2. Expanded Programme of Immunization (EPI)

Objectives

To immunize 223,000 children under 1, and 280,000 under 2, in urban and rural areas respectively. To immunize 653,000 women against tetanus toxoid. Depending on security it is expected to increase the national coverage from 40 to 50%.

Activities

In Kabul, train and place 84 new vaccinators/PHC workers; train 300 vaccinators, 55 supervisors, 15 cold chain technician and 400 other health personnel in various aspects of immunization. In addition, 42 new fixed centers will be established and an estimated 100 mobile teams will operate from these centers. From Kabul the programme will focus on Government controlled urban centers and from Peshawar and Quetta in the rural areas. Establish a disease surveillance scheme to evaluate the effectiveness of the EPI programme. Procure and distribute 964,000 doses of BCG, 1.9 million doses of polio and DPT, 626,000 of measles and 900,000 doses of TT vaccines. In Peshawar train 300 vaccinators, 25 EPI supervisors and 15 cold chain technicians. Procure and distribute 560,000 doses of BCG, 390,000 doses each of DPT and OPV; 426,000 doses of measles and 716,000 doses of DPTP and 3.6 million doses of TT vaccines. Upgrade two existing vaccine storage facilities and place an additional three vaccine storage facilities in strategic locations.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNICEF | 3121 | 1296 | 1825 |
| WHO | 400 | 106 | 294 |
| Total | 3521 | 1402 | 2119 |

## 3. Control of Diarrhoeal Diseases (CDD)

Objectives

To increase to 25% the access of the child population to oral rehydration therapy (ORT) and reduce by about 10% diarrhoea-related diseases. These targets require the treatment of 1,000,000 children aged 0-5.

Activities

Install additional machinery at the Avicenna Pharmaceutical Institute for the production of up to 3,000,000 sachets of ORS in 1992 to be supplied to towns and rural areas of some 20 provinces in Afghanistan. Establish 220 ORT corners in these and other provinces. Train or retrain 500 medical and paramedical staff in prevention and management of diarrhoea. Hold training workshops on home management and clinic management of diarrhoea in densely populated areas.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNICEF | 400 | 200 | 200 |
| WHO | 475 | 87 | 388 |
| Total | 875 | 287 | 588 |

## 4. Acute Respiratory Infections (ARI) Control

Objectives

To reduce the high fatality rate associated with ARI by providing treatment to 150,000 children through health facilities in Kabul, Herat, Mazar, Jalalabad and Faizabad. To increase the knowledge of 40% of health care personnel on the management of ARI.

Activities

Implement ARI standard case management. Train 100 doctors, nurses and other health staff. Prepare and distribute education and communication materials. Supply drugs and other related provisions. Two national workshops will be followed by district/ regional training workshops to cover 25% of the densely populated areas with existing medical facilities.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNICEF | 150 | 100 | 50 |
| WHO | 280 | 87 | 193 |
| Total | 430 | 187 | 243 |

## 5. Nutrition

Objectives

To reduce severe and moderate malnutrition among children and maternal malnutrition. To provide treatment to 200,000 children 0-5 and provide 300,000 pregnant women with micronutrients supplementation against iron deficiency anaemia and iodine deficiency.

Activities

Procure and distribute micronutrients. Design a comprehensive nutrition package in 6 districts. Support nutrition rehabilitation units in 3 hospitals in Kabul and 4 provincial hospitals. Train and retrain 750 health staff working in nutrition and related fields. Install an iodisation plant in one northern rock-salt mining facility to increase the availability of iodised-salt to 20%; and other related activities.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNICEF | 301 | 200 | 101 |
| WHO | 250 | 60 | 190 |
| Total | 551 | 260 | 291 |

## 6. Human Resources for Health Development

Objectives

To increase the number of trained personnel including community-based health workers and Traditional Birth Attendants (TBAs) by 20%. To improve the knowledge and skills of health care personnel in basic health centers, referral points, national hospitals and other health facilities.

Activities

Train primary health workers in health manpower policy and strategy planning. Train trainers and produce learning materials. Training activities will involve: a) improve the knowledge and skills of the existing health care personnel, from the basic health centers and referral points to national hospitals and health institutions; b) consultancies on health manpower policy and strategy planning refresher courses and workshops, primary health workers training, production of learning materials as well as training of trainers will form a coordinated series of activities.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| WHO | 2173 | 800 | 1373 |

## 7. Control of Communicable Diseases

### a) Malaria Control

Objective

To cover 20% of malaria-endemic areas through existing health facilities with diagnostic and treatment facilities including availability of a second line of drugs in case of resistance to chloroquine.

Activities

Run workshop on malaria control and treatment to highlight the problems; initiate and monitor surveillance programme; procure supplies and drugs; strengthen vector-control activities through community participation; and other related activities.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| WHO | 500 | 154 | 346 |

### b) Leishmaniasis control

Objective

To cover 20% of endemic areas with diagnostic and treatment facilities.

Activities

Procure drugs for treatment and sand-fly control measures.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| WHO | 220 | 10 | 210 |

**c) Tuberculosis control**

Objective

To increase case-finding and treatment activities in 10% of densely-populated areas.

Activities

Hold one national workshop on latest case finding, treatment, and follow-up methodologies. Procure supplies for multiple drug-therapy and their distribution. Strengthen diagnostic and referral services. Improve national competency on TB treatment through training and research.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| WHO | 500 | 140 | 360 |

**d) Leprosy control**

Objective

To cover 20% of the endemic areas in central Afghanistan with treatment facilities using multiple drugs for the Hazarajat groups.

Activities

Enrol new leprosy patients through educational campaign in the endemic areas. Procure and distribute anti-leprosy drugs and ensure compliance to the regime. Rehabilitate patients with disability.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| WHO | 145 | 40 | 105 |

**e) Control of diabetes**

Objective

To improve the support for preventive, diagnostic and long-term management of diabetes to 30% of the population in the urban areas and their immediate surroundings.

Activities

Provide technical assistance and training. Provide essential drugs and other supplies to needy patients. Carry out in-depth studies on the problem of diabetes in Afghanistan.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| WHO | 150 | 11 | 139 |

**f) Prevention of blindness**

Objectives

To provide rehabilitation services to 10% of cataract-affected population through cataract operations. To mount a campaign to inform, diagnose and control trachoma and its long-term effects in 20% of the affected population.

Activities

Hold cataract operation camps at suitable locations run by ophthalmologists. Set up a factory to produce glasses and simple frames. Procure and distribute anti-microbial drugs against trachoma.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| WHO | 200 | 21 | 179 |

## 8. Control of Other Communicable Diseases

Objectives

To increase awareness among health care providers and the general population of the problem of dangerous communicable diseases like AIDS, meningitis, rabies etc. and their control measures.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| WHO | 210 | 50 | 160 |

## 9. Mental Health and Drug Abuse Programmes

Objectives and Activities

To establish and support three stress-management and drug detoxification centres. To provide training to 30 physicians on stress

management techniques through consultancies and training abroad. To procure appropriate psychotropic drugs. To reduce the number of heroin addicts in Afghanistan by providing an expanded network of community-based drug detoxification centres. To assist in the formulation and application of a drug abuse control policy by establishing a Drug Abuse Prevention Reference Centre.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| WHO | 330 | 85 | 245 |
| UNDCP | 82 | 12 | 70 |
| Total | 412 | 97 | 315 |

## 10. Essential Drugs Programmes

Objectives and Activities

To support and strengthen the Avicenna Pharmaceutical Institution in Kabul to produce essential drugs like intravenous solutions and antibiotics in capsules. To procure 20% of the requirement of chemicals and raw materials.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| WHO | 1245 | 138 | 1107 |

## 11. Oral Health

Objectives and Activities

To set up three modern dentistry facilities in different regions. To provide training to 30 dental technicians and hygienists.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| WHO | 250 | 71 | 179 |

## 12. WHO Field Sub-offices in Afghanistan

Objectives

Provide technical backstopping to local health staff operating in the rural areas in Afghanistan.

Activities

To establish 6 WHO Field Sub-Offices and staff them with six national professionals, supported by 6 UNVs and coordinated by international professional staff, based in Kabul, Peshawar and Quetta (and also in Mashad/Tehran when approved). Geographical areas under consideration are Badakhshan, Balkh, Helmand and Herat, in addition to Kandahar and Paktia (under implementation in 1991). Recruit support staff as required.

Establish Health Information System (HIS), with a database in Kabul, particularly for disease surveillance and monitoring of health facilities.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| WHO | 400 | | 400 |

## 13. Assistance to Disabled Afghans

Objectives

To improve and strengthen existing disability-care facilities in the provision of services to disabled Afghans.

Activities

Provide support to three orthopaedic workshops and components production facilities. Establish two orthopaedic workshops and support one new rehabilitation centre.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| WHO | 1175 | 145 | 1030 |

## 14. Rehabilitation/Construction of Primary Health Facilities

Objectives

To rehabilitate basic health centers.

Activities

Activities in this area will include the rehabilitation of 40 basic health centers; 6 Alakadari (sub-district) health centers, 2 Wolaswali (district) hospitals; provision of essential supplies to 15 sub-district health centers, 10 district hospitals and 5 provincial/regional hospitals.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| WHO | 5120 | 1084 | 4036 |

*The United Nations-sponsored social worker in a refugee camp near Peshawar tells of the 11 year-old addict he just met. The boy picked up the habit from his 14 year-old brother. Another family has three sons - ages 19, 16 and 14 - in a detoxification clinic. They have been rejected by their parents for stealing the mother's wedding bracelets and extorting money from other children to buy drugs.*

* * *

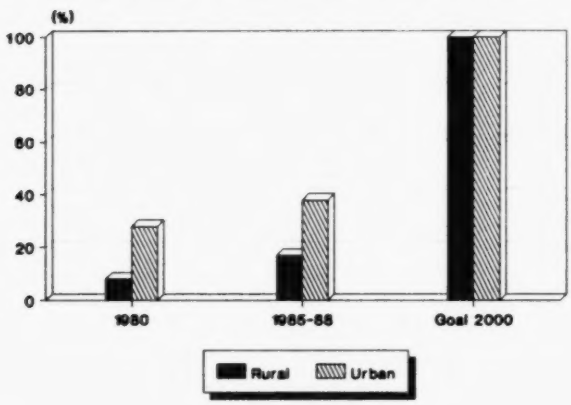
*"Living conditions there today are worse than they were during my last visit, 32 years ago." WFP member participating in a UNOCA assessment mission to Ghor Province, November 1990.*

# Water Supply and Sanitation

The International Drinking Water Supply and Sanitation Decade (IDWSSD) of the 1980s targeted universal access to water supply and sanitation for all developing countries by 1990. After 10 years of global effort, the water supply coverage in 1990 among the developing countries was around 77 per cent and 50 per cent for urban and rural areas respectively.

Afghanistan during this decade did not benefit from any of the world-wide efforts and techniques. Instead the war and lack of maintenance has destroyed much of what already existed. Safe drinking water remains one of the greatest needs in Afghanistan today. Less than 15 per cent of the population overall, and in rural areas only 4 per cent, has access to safe water. As in many developing countries, the burden on the woman and girl child collecting water for essential family use is arduous and time-consuming. Nationally, over 80 per cent of the population is exposed to water-related diseases. At times intestinal diseases, especially salmonellosis, diarrhoea and typhoid reach epidemic proportions.

ACCESS TO SAFE DRINKING WATER




Sanitation problems are serious. Adequate waste disposal systems, even in urban areas, do not exist. Sewage and refuse is discharged into streets. Pit and open vault latrines, when they exist, are generally badly used and maintained. In some urban areas the municipalities operate a solid waste disposal collection and landfill system, but service lags far behind demand.

Provision of community-based water supply systems in rural areas is a primary function of UNDP's rural rehabilitation project based in Mazar-i-Sharif, which commenced operations in 1991. Similarly UNICEF has, in collaboration with local implementing partners, undertaken projects aimed at providing safe drinking water.

In urban areas UNDP/OPS has a long-standing commitment to the development of water supplies, currently focussed on Kabul. Improvements to the water supply system are planned to provide potable water to 1.4 million people in reasonable quantities.

Although modest as compared to the needs, the following projects will be implemented by UNDP, UNICEF and WHO.

These activities may be further reviewed and enhanced based on the UNDP rehabilitation needs assessment to be undertaken in early 1992.

# PROGRAMME COMPONENTS

## Goal

- To improve access to safe drinking water supplies and sanitation.

## Objectives

- To rehabilitate and repair water supply facilities and schemes to raise access and coverage of potable water in rural/urban areas of 13 provinces.
- To promote better household and enviromental sanitation.

### 1. Activities (rural)

Assist community groups through on-the-job training and supervision. Carry out needs and feasibility assessments for renovation of systems. Emphasise community education and social mobilisation to promote user participation in the construction and maintenance of facilities and proper domestic use of water. Experiment and demonstrate low-cost appropriate technology for water supply and disposal of excreta and solid waste at community level.

Project activities in 1992 will include: (i) the rehabilitation of WES facilities in 100 health and children's institutions (ii) renovation of 50 community piped water schemes; (iii) rehabilitation of 570 hand pump systems; (iv) procurement and repositioning of pumps, piping, casing and other WES supplies and equipment; (v) 350 drilled and dug wells, construction of 1300 latrines; (vi) improving excreta and waste disposal facilities in 50 children and health institutions; (vii) organising a sanitation campaign in 5 provincial capitals; (viii) training of 240 technical, managerial and programming staff in Government and opposition controlled areas and orientation of 500 community and religious leaders; (ix) advocacy and community education including the use of radio and TV, graphic and printed messages and group interviews; (x) a specific WES development sub-project for Faizabad city and 6 surrounding villages; and (xi) WES area-based activities from Peshawar.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNDP/OPS | 600 | | 600 |
| UNICEF | 2030 | 400 | 1630 |
| WHO | 1280 | 140 | 1140 |
| Total | 3910 | 540 | 3370 |

### 2. Activities (urban)

Improve water supply in Kabul for those presently served (about 1.4 million people). Formulate, design and construct proposals for Kabul water supply to serve approximately 400,000 additional people; Design and construct sewage treatment plants and associated facilities for 3 hospitals in Kabul and one each in Mazar-i-Sharif and Herat. Identify areas requiring immediate sewerage and low cost sanitation works in Kabul. Formulate a cost effective plan for solid waste management to serve up to 3 million residents in Kabul .

Complete design work and commence construction during 1992.

| Executing Agency | Budget | Available (In thousands of US$) | Shortfall |
|---|---|---|---|
| UNDP/OPS | 1041 | 1041 | |

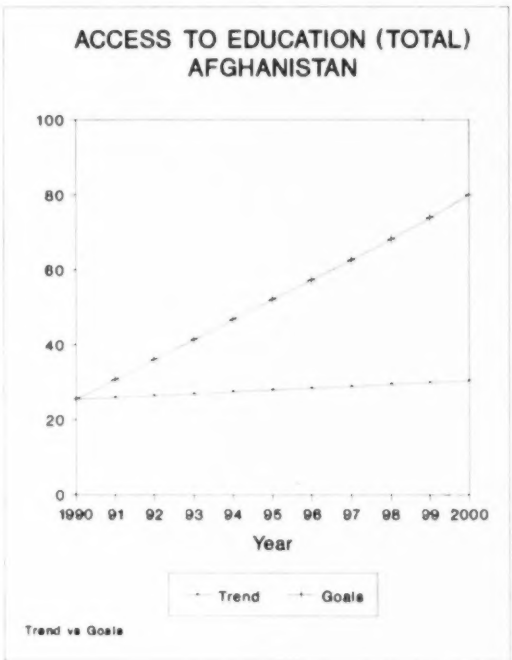
## RESOURCE REQUIREMENTS FOR HEALTH, WATER SUPPLY AND SANITATION

| S/No | Programme Components | Executing Agency | (In thousands of US$) Budget | Available | Shortfall |
|---|---|---|---|---|---|
| | **HEALTH** | | | | |
| 1. | Primary Health Care (PHC) / Maternal and Child Health (MCH) / Family Planning (FP) | UNICEF, WHO and UNFPA | 3,700.5 | 2,054.0 | 1,646.5 |
| 2. | Expanded Programme of Immunization (EPI) | UNICEF, WHO | 3,520.7 | 1,402.0 | 2,118.7 |
| 3. | Control of Diarrhoeal Disesases (CDD) | UNICEF, WHO | 874.8 | 287.0 | 587.8 |
| 4. | Acute Respiratory Infections Control (ARI) | UNICEF, WHO | 430.0 | 187.0 | 243.0 |
| 5. | Nutrition | UNICEF, WHO | 550.6 | 260.0 | 290.6 |
| 6. | Human Resources for Health Development | WHO | 2,173.0 | 800.0 | 1,373.0 |
| 7. | Control of Communicable Diseases* | WHO | 1,715.0 | 376.0 | 1,339.0 |
| 8. | Control of other Communicable Diseases | WHO | 210.0 | 50.0 | 160.0 |
| 9. | Mental Health and Drug Abuse | WHO, UNDCP | 412.0 | 97.0 | 315.0 |
| 10. | Essential Drugs | WHO | 1,245.0 | 138.0 | 1,107.0 |
| 11. | Oral Health | WHO | 250.0 | 71.0 | 179.0 |
| 12. | WHO Field Sub-offices | WHO | 400.0 | - | 400.0 |
| 13. | Disabled Afghans | WHO | 1,175.0 | 145.0 | 1,030.0 |
| 14. | Rehabilitation/Construction of Health Centers | WHO | 5,120.0 | 1,084.0 | 4,036.0 |
| | | **SUB-TOTAL** | **21,776.6** | **6,951.0** | **14,825.6** |
| | **WATER SUPPLY AND SANITATION** | | | | |
| 1. | Rural Activities | UNDP/OPS, UNICEF, WHO | 3,910.0 | 540.0 | 3,370.0 |
| 2. | Urban Activities | UNDP/OPS | 1,041.0 | 1,041.0 | - |
| | | **SUB-TOTAL** | **4,951.0** | **1,581.0** | **3,370.0** |
| | | **GRAND TOTAL** | **26,727.6** | **8,532.0** | **18,195.6** |

* Includes: malaria, leishmaniasis, TB, leprosy, diabetes, blindness prevention. For budget breakdown, please see the Health text.

# Basic Education

Educational attainments of Afghans rank among the lowest in the world. Access to formal and informal education opportunities has always been limited and the war has further reduced the quantity and quality of education opportunities available. The damage done by war to what was a progressively developing education system has been enormous and has resulted in the waste of valuable human lives and the denial of the basic human right to education to large numbers of children, young people and adults.




It is estimated that 2,000 schools in Afghanistan have been destroyed, 2,000 teachers have died and 15,000 have left the teaching profession. Of children aged 7-11, only 19 per cent attend school today. If the conditions were normal, there would now be one million children in the class rooms in primary education. In fact there are probably only 150,000. The literacy rate for men and women are 38 and 9 per cent respectively. In rural areas the literacy rate for women is almost zero.

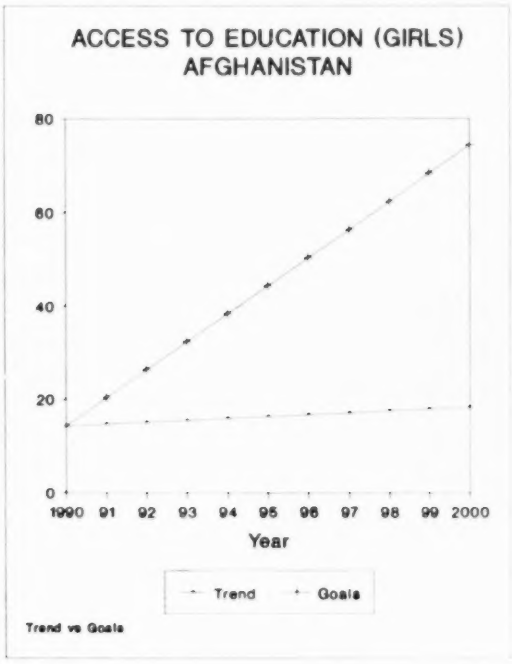
Gender and ethnic group both influence access to primary education. In rural Afghanistan and among refugees in Pakistan, gender is clearly the most important factor influencing primary school attendance. In the schools administered by the Commissionerate for Afghan Refugees in Pakistan there are 14 times more male than female students. Within Afghanistan at schools supported by NGOs, attendance by girls is largely precluded by the absence of women teachers. 75 per cent of all women teachers are thought to be located in Kabul.

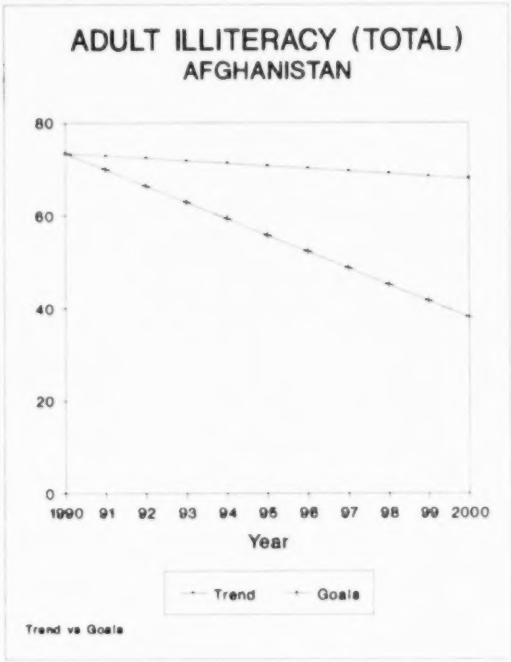
The quality of teaching continues to decline drastically. Only 35 per cent of present primary teachers are regarded by the Afghan Ministry of Education as academically qualified and trained. Wastage remains a serious problem in both government and resistance operated schools. UNICEF estimates a drop-out rate of around 50 per cent in grade 1 and 15-25 per cent in other grades. This involves a serious waste of the limited resources available to education.

In every chapter of this report the need for human resources development is identified as a top priority. A recent skills inventory study indicates that 19.4 per cent of female health workers are illiterate. Afghans will have a titanic task rebuilding their country with extremely scarce trained human resources.

NGOs working in the field of education began to respond to this tragic problem in the mid-1980s. Many NGOs tried to build up the capacity of rural communities to make available schooling facilities with minimum requirements. Efforts were made to train teachers and supervisors. NGOs, community leaders and universities specialising in education worked together to produce an acceptable curriculum for rural schools. The Ministry of Education has also revised its curricula several times over the past five years.

In 1990-91 WHO, UNICEF and United Nations Educational, Scientific and Cultural Organisation (UNESCO) translated the book *Facts for Life* into Dari and Pashto and made available 6,000 copies as reading and learning material to both rural and urban schools.




UNESCO has developed a basic education scheme oriented to life and skills learning and tested it in rural areas of Ghazni, Kandahar, Paktia and Wardak. This project has designed, produced and distributed tent schools, room dividers, squatting desks, teachers and students kits as well as reading material. Master trainers were trained and three Village Basic Education Centres (VBECs) were built. In urban and rural areas UNICEF has supported primary schools with similar supplies and equipment. In Kabul UNESCO has tried to improve teachers' and supervisors' skills through workshops and seminars.

The task of reconstructing the education system in Afghanistan is enormous and will be further complicated when the large number of refugees and displaced persons

return to their homes. It is inconceivable that rehabilitation can be carried out by a central Ministry of Education on its own. The resources available will inevitably be limited and it would be unrealistic to expect the allocation of large sums to education. Rebuilding the education system will therefore demand a high level of voluntary contributions from the people themselves in terms of labour, ownership and other forms of assistance.

*A 13 year-old boy chatting with a United Nations official made a comprehensive analysis of the Afghan war, running through the pros and cons of every available armament. Impressed if somewhat horrified, the official asked him some questions. The boy, it turned out, was illiterate. He knew warrior songs, but no children's rhymes, could relate volumes of harrowing war anecdotes, but no traditional tales. He seemed to have passed directly from infancy to adulthood entirely omitting childhood.*

* * *

*Why, the United Nations education official asked the mother in the Kabul street, was her eight year-old son with her, and not in school? "School doesn't bring me bread", she replied. The boy worked every day in the bazaar. The family had no other income.*

In the light of worldwide experience in education so far and the principles and policies adopted by the world community in the Jomtien "World Education Conference" held in 1990 in Thailand, the basic education challenge for Afghanistan is to adopt a grass roots and low cost approach.

The United Nations system is therefore gearing its efforts towards a community based and owned basic education scheme which is guided by the principles of relevancy, efficiency, equity and quality. The establishment of local organisations capable of assuming responsibility for the development of educational facilities is essential. This implies increased participation by local groups in the making of educational decisions. The provision of basic education for all and not children alone will be the priority for the immediate future and this requires innovative approaches to the organisation of services. These efforts will be aimed at three categories: children of primary school-age, children and young people of all ages who have missed all or some primary education, and adults.

## PROGRAMME COMPONENTS

### Goal

- To extend the coverage of Basic Education for All to as many areas as possible.

### Objectives

- To train and support identified facilitators (or social animators) to advocate for basic education, and mobilise their communities to identify and prioritise their needs.
- To provide training skills to identified community members to meet their local learning needs.
- To support communities through the provision of appropriate materials to enhance the delivery of basic education.
- To adopt a multisectoral approach in the delivery of basic education, by involving all the United Nations agencies participating in Operation Salam.

### 1. Community-based Basic Education

Activities

(i) Train and support identified facilitators or social animators for advocacy and mobilisation of communities; (ii) train community members to meet their local learning needs. This includes training 750 basic education centre tutors and day care supervisors; (iii) supply appropriate materials and equipment to communities, including Village Basic Education Centres (VBEC); (iv) assist 200 poor primary schools and 100 other schools with essential equipment and supplies; establish/enlarge 50 basic education centres in deprived areas in the provinces of Badakhshan, Balkh, Herat, Kabul, Kapisa and Parwan benefitting an estimated 300,000 children as well as 10 VBECs to be established in the eastern and southern provinces where an estimated 50,000 children will have access to Basic Education Services; and (v) attach an education component for women to projects in other sectors. UNESCO and UNICEF will cooperate closely with UNDCP and ILO in carrying out the above activities.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNESCO | 1900 | 100 | 1800 |
| UNICEF | 750 | 400 | 350 |
| Total | 2650 | 500 | 2150 |

### 2. Drug Abuse Awareness

Objectives

To prevent the spread of drug addiction and dependency through support to drug awareness creation programmes in the refugee camps and in Afghanistan.

Activities

Short training courses in drug awareness for communities in traditional opium growing areas of Badakhshan, Helmand, Kunar and Nangarhar; dissemination of awareness information in local languages to schools, com-

munities and through appropriate news media channels; support existing awareness projects through follow-up on participants in previous awareness training courses.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNDCP | 232 | 202 | 30 |

## 3. Vocational Training

Objectives

To train Afghan manpower in supervisory, administrative, technical and vocational skills required for implementing projects inside Afghanistan.

Activities

Design and implement training systems and programmes to include curriculum development, training of trainers and establishment of mobile training units. Assist other agencies to develop knowledge and skills of their Afghan technical staff in training, supervisory and administrative skills. Liaise with UNESCO to share the workshop facilities where adults will be trained in vocational and practical skills.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| ILO | 1800 | | 1800 |

## 4. Health Education and School Health

Objectives

To improve and strengthen the current health education facilities in identified priority areas in order to provide services to 25% of the school-going children. Improve and strengthen the current health education activities in priority areas.

Activities

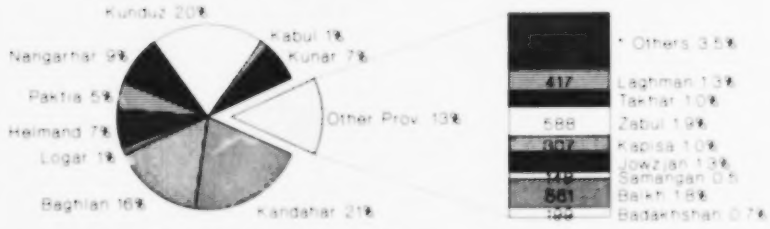
Provide technical support and assistance in the formation of a central school health service with responsibilities for health care coverage of school children in areas of the country where school attendance is high. Provide drugs and transportation. Improve and strengthen the current health education activities in priority areas by hiring health education consultants for 6 man months, and hold workshops on training and development of health education materials. Produce and distribute the materials for use by schools and the news media.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| WHO | 487 | 135 | 352 |

RESOURCE REQUIREMENTS FOR BASIC EDUCATION

| S/No | Programme Components | Executing Agency | (In thousands of US$) Budget | Available | Shortfall |
|---|---|---|---|---|---|
| 1. | Basic Education | UNESCO, UNICEF | 2,650 | 500 | 2,150 |
| 2. | Drug Abuse Awareness | UNDCP | 232 | 202 | 30 |
| 3. | Vocational Training | ILO | 1,800 | | 1,800 |
| 4. | Health Education and School Health | WHO | 487 | 135 | 352 |
| | | GRAND TOTAL | 5,169 | 837 | 4,332 |

# REPATRIATION GRANT PROJECT
## Statistics of Destination in Afghanistan
### (by Provinces)

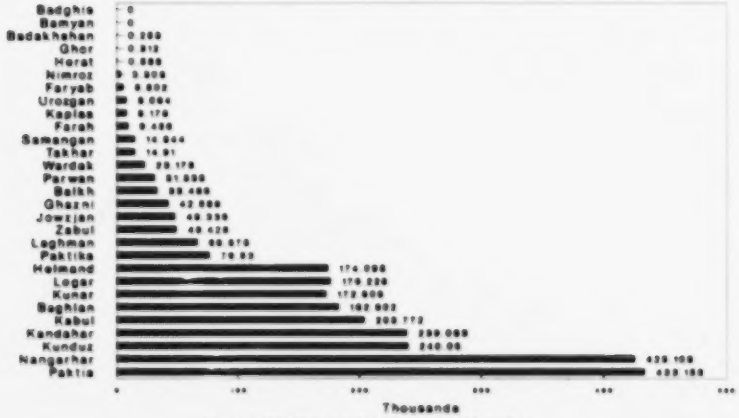



Based on NWFP returns thru 29/09/91
Based on Baluchistan returns thru 29/09

* Other Includes
Farah
Ghazni
Paktika
Parwan
Urozgan
Wardak

**Dereg. Figures for 9 Priority Provinces**

# PROVINCE OF ORIGIN OF AFGHAN REFUGEES IN PAKISTAN




More than 83% of the Afghan refugees who fled to Pakistan originate from the nine provinces listed at the bottom

# Voluntary Repatriation

Afghans constitute the largest refugee population in the world. According to statistics compiled in the countries of asylum, there are some six million in Iran and Pakistan. Their presence has had significant economic, social and political consequences for those countries. Their absence and their return have major implications for Afghanistan.

Refugees began arriving in asylum countries in mid-1978. Numbers grew quickly. By 1981 there were two million in Pakistan alone, by mid-1983 three million. Today, according to the Government of Pakistan, an estimated 3.2 million refugees live in some 345 UNHCR-assisted refugee villages in Pakistan, some 70 per cent in North West Frontier Province, 25 per cent in Baluchistan, 5 per cent in the Punjab, and a small number scattered elsewhere.

The Government of the Islamic Republic of Iran estimates that approximately three million Afghans are refugees in Iran. Most come from the Hazarajat, western and northern Afghanistan. A number found themselves unable to return while working in Iran and became refugees *sur place*. Only a small percentage are in camps. The vast majority, many of them Hazara men, live in urban areas where they are generally well integrated into the local economy. An estimated 500,000 refugees are living in the border provinces of Khorasan and Sistan Baluchistan, in villages or spontaneous settlements where they receive subsidised food rations. From the outset, the Government has been largely responsible for the provision of food, water, health and other essential services to the refugees.

More than 80 per cent of the refugees surveyed in Pakistan originate from nine Afghan provinces, six of them bordering or very close to Pakistan; the three exceptions are Baghlan and Kunduz in the north, and Kabul. A substantial majority are Pashtuns; other ethnic groups include Baluch, Hazaras, Mongols, Nuristanis, Tajiks, Turkmen and Uzbeks. Almost all come from rural backgrounds. Women and children make up nearly three-quarters of the total.

Basic services and some food commodities are provided to registered refugees in the refugee villages. Income is obtained through participation in the Pakistani labour market and through income-generating activities in the refugee villages. Unregistered refugees, usually in urban areas, fend for themselves.

While the nature of the conflict has changed considerably since the withdrawal of Soviet troops, war has not ended. Most refugees in both countries cite the continuing hostilities and insecurity as the main reasons not to repatriate. Other related obstacles are the lack of a recognised civil authority capable of maintaining law and order, the presence of mines and unexploded ordnance, the destruction or deterioration of the agricultural infrastructure, the lack of shelter, food stocks, health care facilities and schools, ruined roads and the general disruption of the rural economy. Furthermore, some leaders are reluctant to allow refugees to return to areas which they do not control. Others discourage return on political grounds. The economic advantages that some Afghans have found in their countries of asylum can also militate against repatriation.

But voluntary repatriation - on a scale that would be considered massive elsewhere - has and is taking place as some refugees decide that conditions in their home areas are sufficiently safe. Since

July 1990 over 40,000 families, representing over 200,000 persons, have benefitted from repatriation grants. Increased UNHCR monitoring has shown that a substantial percentage of those encashing ration cards have returned to Afghanistan.

Refugees' choice of timing for return is determined by many factors in addition to security. Many are certainly encouraged by the availability of the grant, as well as the rehabilitation projects taking place in their home areas. Some returning refugees have cited deterioration of conditions in asylum countries as an important consideration in their decision. An early return is sometimes prompted by the desire to reclaim or protect their land. Some refugees, particularly those near their homes, have opted for partial or seasonal repatriation, male members leaving families behind while they plant and harvest crops, or begin reconstruction.

In light of the above, UNHCR has adopted an operating assumption that 300,000 individuals (about 50,000 families) will choose to return in 1992. This figure, it must be stressed, is an assumption reflecting present conditions. It is not a target. It will allow time to obtain increased resources if the rate of return proves to be higher; it may have to be reduced in the case of adverse developments in Afghanistan.

UNHCR's role in repatriation derives from its mandate to provide international protection to refugees and to seek permanent solutions to refugee problems. The Geneva Accords and subsequent bilateral agreements have reaffirmed the principle that the return of the refugees should be wholly voluntary, and set out the role to be played by UNHCR.

Practical arrangements for return are best made by refugees themselves. Most refugees will continue to organise their own transport. In Pakistan, registered refugees are assisted by the repatriation grant. Launched in July 1990 by UNHCR and WFP in cooperation with the Government of Pakistan and UNOCA, the grant is a cash/wheat package provided in exchange for refugee ration cards. Currently valued at US$135 plus 300kg of wheat per family, it corresponds in value to less than one year of food rations, and is intended to assist families with part of the cost of return and rehabilitation. Refugees who benefit from the repatriation grant surrender their entitlement to assistance in Pakistan.

UNHCR will additionally support transport for vulnerable groups, unregistered refugees and registered refugees whose travel costs to distant areas are far greater than can be met by the repatriation grant. At present refugees returning from Iran receive assistance only after arrival at a transit centre in Afghanistan.

The series of repatriation transit centres set up in Afghanistan since 1988 are increasingly used by returning refugees, particularly in areas where there is a UNHCR presence. Security permitting, new field houses and transit centres will be established in Afghanistan along the main routes used by returning refugees. UNHCR's field presence in Pakistan will continue to supervise the repatriation grant programme, and collect information and statistics on repatriation movements and routes, security and protection issues, and assistance needs. Particular attention will be paid to the crossing points on the Iranian border in view of the limited facilities in western Afghanistan.

# PROGRAMME COMPONENTS

## Goal

- To facilitate the safe and voluntary repatriation of refugees.

## Objectives

- To ensure that repatriation is both voluntary and unhindered.
- To provide support for the repatriation of up to 50,000 refugee families.
- To assist in the creation of conditions inside Afghanistan conducive to the return of refugees and their successful reintegration.
- To maintain preparedness for large scale repatriation.

### 1. Protection

Activities

Maintain existing field houses, and extend programme in Pakistan to include a permanent presence at two major border crossing points in Baluchistan Province. Open up to five additional field houses in Afghanistan, depending on rates of return and security. Establish a field presence in Iran near the Afghanistan border. Continue to accompany groups of returnees when requested, depending on security. Intervene when required with the relevant authorities.

Continue to collect statistics from encashment centres, border crossings and transit centres, augmented by field monitors in Afghanistan, Iran and Pakistan. Provide information to concerned agencies on levels of return and areas requiring additional rehabilitation assistance.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNHCR | 900 | * | * |

### 2. Direct Repatriation Assistance Programmes

#### i) Repatriation Grant in Pakistan

Activity

Provide a cash/wheat package, in exchange for ration cards, to up to 35,000 families.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNHCR | 4900 | * | * |
| WFP | 10,500 MT wheat | | |

#### ii) Transit Centres in Afghanistan

Activities

Complete the upgrading of facilities in Islam Qala, Mazar-i-Sharif and Char Asyab. Provide infrastructural support for up to five more transit centres located along return routes or at destinations in both government and non-government areas.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNHCR | 1000 | * | * |

**iii) Food Security for Returnees**

Activities

Provide a food package sufficient for four months to returning refugees passing through transit centres in areas where UNHCR has a field presence. Extend to a further five locations in government- and non-government controlled areas, as security permits.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNHCR | 1000 | * | * |
| WFP | 5,000 MT wheat | | |

**iv) Transportation Assistance**

Activities

Fund road transportation for returning refugees inside Afghanistan, expanding coverage where possible. Provide air transport to returning refugees from Iran or Pakistan if security problems prevent movement in Afghanistan. Assist groups with special needs, such as unregistered refugees in Pakistan who do not benefit from repatriation grants, as well as vulnerable individuals or families, ethnic minorities and those travelling long distances.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNHCR | 1000 | * | * |

## 3. Reintegration Assistance to Returnee Communities

Activities

Alert other agencies to new or unfulfilled rehabilitation requirements in places to which refugees are returning or are expected to return. Participate in joint ventures with other agencies unable to meet the full cost of projects facilitating reintegration. Maintain UNHCR capacity to intervene directly in areas of expected high refugee return when reintegration needs cannot be met by other agencies. Assist returnees' ability to survive until self-sufficient through, for example, provision of tents, transportation of roof beams, seed for a first crop or water pump for minimal irrigation while systems are repaired. Tailor the programme to benefit unregistered as well as registered returnees, and vulnerable groups such as the handicapped or widows with children.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNHCR | 2500 | * | * |

## 4. General Preparedness Programmes

Activities

**i) Prepositioning**

Maintain a prepositioned stock of some 10,000 tents and 50,000 tarpaulins for contingencies such as the need to create transit shelter facilities in Afghanistan and to provide temporary shelter for returnees in the event of large-scale repatriation. Retain other commodities such as G.I. Sheets and agricultural tools in Pakistan and Iran for use in Afghanistan.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNHCR | 1670 | 1670 | |

**ii) Telecommunications**

Communications and logistics equipment transferred to the Persian Gulf Emergency operation will be returned or replaced as field operations expand.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNHCR | 200 | 200 | |

## 5. Programme Support

Essential programme support at Headquarters and in Iran, Pakistan and Afghanistan.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNHCR | 3700 | * | * |

| RESOURCE REQUIREMENTS FOR VOLUNTARY REPATRIATION | | | | |
|---|---|---|---|---|
| S/No Programme Components | Executing Agency | (In thousands of US$) Budget | Available | Shortfall |
| 1. Protection | UNHCR | 900 | * | * |
| 2. Direct Repatriation Assistance Programmes | UNHCR | | | |
| i. Repatriation Grant in Pakistan | | 4,900 | * | * |
| ii. Transit Centres in Afghanistan | | 1,000 | * | * |
| iii. Food Security for Returnees | | 1,000 | * | * |
| iv. Transportation Assistance | | 1,000 | * | * |
| 3. Reintegration Assistance to Returnee Communities | UNHCR | 2,500 | * | * |
| 4. General Preparedness Programmes | UNHCR | | | |
| i. Prepositioning ** | | 1,670 | 1,670 | - |
| ii. Telecommunications ** | | 200 | 200 | - |
| 5. Programme Support | UNHCR | 3,700 | * | * |
| Funds available but not yet allocated | | | 3,330 | |
| | **GRAND TOTAL** | **16,870** | **5,200** | **11,670** |
| 6. Food | | 15,500 MT wheat | | |

* Indicates that no funds have yet been allocated from available resources.

** Existing stockpiles were drawn on for UNHCR operations in the Persian Gulf and for the United Nations response to natural disasters in Afghanistan. Funds received for these will be used to replenish stocks as the need arises, unless more urgent United Nations-funded priorities are identified.

*During the summer of 1991 a group of elders from a refugee village in Baluchistan asked the UNHCR office in Quetta to help them and the 100 families they represented to return to their home areas along the Helmand river. They had left in the early 1980s. Some of them had returned to sow and harvest crops, but only for brief periods. Now they thought it was safe enough for them all to go back for good. But there were problems. All the houses in the village had been destroyed. The irrigation system was badly damaged. Even if they encashed their ration cards, they would be far short of the funds necessary to reconstruct them.*

*UNHCR responded. Officials visited the refugees, then their home area. An assistance package, tailored to their needs, was put together. On a sunny morning in October, the roof beams from the refugees' houses in Baluchistan were loaded onto UNHCR-hired trucks and pick-ups and taken to Helmand. The families arrived a week later, accompanied by UNHCR officals. There they found UNHCR tents waiting, which they could occupy until they had rebuilt their houses. Officals were there to monitor the UNHCR-funded rehabilitation of the irrigation system and construction of new houses. The families are now preparing the land for sowing of winter grain which can be harvested in spring.*

* * *

*United Nations engineers, working with local Afghan specialists through a food-for-work programme, were restoring a village kareze. Karezes are ancient water systems found in parts of Afghanistan. Bombs had reduced this one to a series of mudholes. The old man with a hennaed beard standing watching with a little girl, knew the water system well: "It worked before my time, and it will continue working long after my granddaughter's time."*

# Specific Projects

In addition to the programmes described in the previous chapters, the following specific projects are being conducted in Afghanistan by the United Nations system.

## 1. Shelter

Damage to settlements due to war and abandonment is one of the most striking characteristics of present day Afghanistan. Although no accurate assessment has been possible of the extent of destruction or of likely requirements, it is clearly staggering. It is certain that only a tiny percentage of the six million refugees living abroad will find their homes intact on return. A very large proportion of the 715,000 dwellings required by them must be rebuilt or rehabilitated. Public facilities such as schools, workshops, community buildings and bridges must also be reconstructed. Overwhelmingly the task will fall to private individuals.

A UNDP-funded project implemented by UNCHS (Habitat) has assisted community reconstruction efforts by increasing the local supply of building materials and improving the quality of key materials. Some 40 small-scale projects are underway in Kabul, Kapisa and Parwan provinces, for example rehabilitating brick kilns, constructing small bridges and repairing schools. Sub-contracts for the supply of roofing materials for 1,000 houses have been agreed in the provinces of Kapisa and Paktia, where timber prices are prohibitively high.

Further settlement projects have been discussed with community representatives from Balkh, Jowzjan, Kunduz and Samangan provinces.

Additional sub-offices with United Nations staff are planned in 1992 for Takhar and Wardak. In 1992 emphasis will continue to grow on labour-intensive community projects and the promotion of small scale enterprise.

### Objectives

To support reconstruction and encourage traditional self-sufficiency in shelter construction through the use of local resources and skills.

### Activities

Support directly the rebuilding of a target of 10,000 houses through the supply, production, transport and sale of materials. Repair/upgrade basic infrastructure by supplying materials and technical inputs for bridges, schools, canals, etc. Train staff and supply equipment to upgrade five enterprises in key materials production. Establish three pilot schemes for improved land development with training, planning and community-built infrastructure.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNCHS | 4227 | 1192 | 3035 |

## 2. Road Repair

Afghanistan's total road system of 20,000 kilometres of primary and secondary roads will have to be re-built or extensively renovated. The possible exception is the Kabul - Mazar-i-Sharif 425 kilometre segment which has been regularly resurfaced and maintained. The war, lack of maintenance and unrestricted axle-weights have combined to cause extensive disintegration of a fledgling road network, that was inadequate in its prime. It is estimated that at least 25 per cent of the paved primary roads, 30 per cent of the secondary roads and many feeder roads have been effectively destroyed. More than

300 bridges and thousands of culverts need replacement.

UNDP has financed a limited survey of road rehabilitation needs. Technical design standards were prepared with extensive involvement of NGOs. During 1991 some 500 kilometres of secondary roads were surveyed and 200 kilometers repaired. This experience has demonstrated that using readily available road construction materials, local labour and basic equipment, rehabilitation is feasible; that technical standards, close supervision and systematic monitoring are essential; that post-rehabilitation maintenance requires extra attention; that primary road rehabilitation is a task for large scale capital donors, not NGOs; and finally that freight control is essential. Even the best roads cannot withstand current axle-weights.

The priority in 1992 will be to consolidate activities already undertaken, using information gained from monitoring and evaluation of existing projects and critical appraisal of design standards. Criteria will be established for selecting future projects and their methods of implementation. In the meantime, a bilateral donor is sponsoring a year-long study of the entire road system and its reconstruction needs. By the end of 1992 a great deal more information and experience should be available. Consideration will then be given to determining the best means by which a long-term programme in this sector might be implemented. The availability of funding from sources outside the United Nations will be assessed. Proposals are already available for major roadworks projects which fall outside the UNDP criterion of secondary roads serving market locations, and go beyond the scale of UNDP funding.

Objective

To rebuild some 829 kilometres of secondary and tertiary feeder roads.

Activities

Rebuild sections of secondary and feeder roads in the following provinces in Afghanistan: Bamyan, Ghazni, Kandahar, Kunar, Nangarhar,Paktia, Paktika, Wardak and Zabul.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNDP/OPS | 7000 | | 7000 |

### 3. Services for the Disabled

Objectives

To provide services to Afghans with disabilities affecting their mobility, vision, hearing or learning capacity, whatever the type or cause. To involve the disabled people and their families, and to utilize them as a resource in planning and designing the regional services.

Activities

(i) Support and strengthen the consumer organisations on a regional level; (ii) train orthopaedic technicians, and assist them to establish and run an orthopaedic workshop; (iii) train physiotherapists and physiotherapy technicians, and deploy them in regional health facilities; (iv) train trainers of blind people in mobility; (v) train teachers in special education to promote the integration of disabled children; (vi) train people in communication with the deaf; (vii) train people to counsel families with mentally-retarded members; (viii) train employment support workers and create vocational training and employment opportunities; (ix) train social animators to liaise between the communities, "consumer" organisations and the regional service resources; (x) support the National Association of Disabled Afghans and other "consumer" disability

organisations; (xi) apply a community participation approach, rather than mere delivery of services.

Continue the existing regional comprehensive service programme in two provinces (Takhar and Wardak/Logar), and establish in at least two new regions (Balkh, Herat or Kandahar).

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| ILO, UNDP/OPS | 1240 | 240 | 1000 |

## 4. Women with Special Needs

### Objectives

To provide opportunities for improving the living conditions of women with special needs, including poor widows, other women living in poverty, women who are heads of household, disabled women and women caring for the disabled. To promote skills training, income-generation activities, literacy and health education. To benefit 20,000 women with special needs in Badakhshan, Baghlan, Herat, Kabul and Mazar-i-Sharif.

### Activities

(i) Train 500 community/village women leaders and improve information networks to identify and maintain programme contact with vulnerable women within their communities; (ii) implement home and community based skills training activities for the disabled and selected poor women; (iii) support income-generating and small food-production activities; (iv) support social forestry/tree planting for firewood and for ecological improvement in areas denuded of vegetation; (v) support female functional literacy; (vi) support social mobilization, advocacy for women's development and dissemination of information for child survival, development and protection; (vii) provide humanitarian assistance for vulnerable women in crisis periods and/or areas; and other associated activities.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNICEF | 500 | 200 | 300 |

## 5. Children in Especially Difficult Circumstances

### Objective

To provide services to some 2,000 children: street children, orphans and children suffering from physical disabilities and mental trauma caused by war injuries and disease.

### Activities

(i) Implement medical referral for children with disabilities caused by disease in collaboration with the League of Red Cross/Crescent Society and the Afghan Red Crescent Society (ARCS); (ii) establish 10 "drop-in" centres to cater to the needs of street children; (iii) provide prosthesis, orthopaedic and rehabilitation services and counselling for amputees in collaboration with the ICRC; (iv) make 4 provincial surveys of children in especially difficult circumstrances (CEDC) in collaboration with the ARCS Community-based Rehabilitation Services For Children; (v) establish a database to collect, analyse and coordinate information and services for all aspects of CEDC including those suffering from mental trauma; (vi) procure essential supplies; and associated activities.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNICEF | 500 | 250 | 250 |

## 6. Field Operations and Emergency Preparedness

### Objectives

To support and strengthen the delivery of Child Survival and Development (CSD) services to local communities by setting up and maintaining operational bases established in

strategic locations, which are capable of responding promptly to emergency situations arising anywhere in Afghanistan.

Activities

In cooperation with other United Nations agencies, (i) maintain the existing 4 programme bases (in Faizabad, Herat, Kabul and Mazar i Sharif) and establish 2 new ones; (ii) provide warehousing and cold storage (for vaccines), inter province and inland transportation of needed supplies and equipment, including the procurement and distribution of essential emergency supplies to severely affected communities; (iii) dispatch field missions to monitor and supervise the delivery of CSD services as well as to identify communities facing imminent crisis; and (iv) establish and maintain radio links between programme bases and mobile missions, and other associated activities.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNICEF | 1000 | 500 | 500 |

## 7. Culture

Objective

To protect the cultural heritage and strengthen national conservation capacities in relation to the physical cultural heritage.

Activities

Provide assistance to Kabul Museum; preserve national archives; safeguard national monuments; preserve Ikat and plain silk weaving; and overall cultural support and administration.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNESCO | 302 | 117 | 185 |

## 8. English Language Training

Objectives

To improve the standard of English and basic computer skills among United Nations counterpart staff and others. To improve the language skills of international staff working in Afghanistan.

Activities

Establish, in Kabul and later in Mazar i Sharif and other provincial cities with a significant United Nations presence, well-equipped and efficiently administered English Language Training Centres for English, French and Dari language teaching; build more classrooms in Kabul to accommodate increasing number of students; and carry out the teaching of these languages.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNESCO | 1022 | 357 | 665 |

## 9. Management Training

Objectives

To improve the management skills of Afghans playing a leading role in the rehabilitation programme. To improve the management effectiveness of Afghan NGOs.

Activities

Implement first phase of a management training programme. Provide support services to Afghan NGOs.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNDP/OPS | 800 | 550 | 250 |

| RESOURCE REQUIREMENTS FOR SPECIFIC PROJECTS | | | | |
|---|---|---|---|---|
| S/No Programme Components | Executing Agency | (In thousands of US$) Budget | Available | Shortfall |
| 1. Shelter | UNCHS | 4,227 | 1,192 | 3,035 |
| 2. Road Repair | UNDP/OPS | 7,000 | - | 7,000 |
| 3. Services for the Disabled | ILO, UNDP/OPS | 1,240 | 240 | 1,000 |
| 4. Women with Special Needs | UNICEF | 500 | 200 | 300 |
| 5. Children in Especially Difficult Circumstances | UNICEF | 500 | 250 | 250 |
| 6. Field Operations and Emergency Preparedness | UNICEF | 1,000 | 500 | 500 |
| 7. Culture | UNESCO | 302 | 117 | 185 |
| 8. English Language Training | UNESCO | 1,022 | 357 | 665 |
| 9. Management Training | UNDP/OPS | 800 | 550 | 250 |
| | GRAND TOTAL | 16,591 | 3,406 | 13,185 |

*In the summer Abdul Ghani heard from the mosque that roof beams would be available for sale in his Panjshir Valley village. He left the lodgings he had occupied in the Kabul outskirts since 1980, and has started repairing the earthen walls of his home helped by his two sons. The rest of his large family are staying with relatives nearby. As soon as the walls are finished he will be eligible to buy 30 beams at a fraction of the market cost. The purchase money will be put towards the repair of the bridge in the valley below, and to improve headworks to irrigate the land on which his livelihood will depend.*

# MAP OF AFGHANISTAN

# Support Programmes

The war has almost totally destroyed communications and logistic infrastructure in Afghanistan. Many roads are impassable. Air transport between cities is at best irregular, and often halted. The official airline's few civilian planes are often grounded due to lack of maintenance. International Civil Aviation Organisation (ICAO) experts have banned United Nations staff from use of the military planes carrying passengers to Faizabad, Herat, Kandahar, Mazar-i-Sharif on the basis of poor maintenance and other hazards. Telephone, telex and other communication systems are all but absent; there are no communication facilities between cities, and often none within Kabul itself.

The United Nations system has therefore organised its own logistic and communication systems. Two linked logistic units have been set up, United Nations Logistics and Transport Operation (UNILOG) serving eastern and south Afghanistan and Logistics Unit for Northern Afghanistan (LUNA) serving the north. A United Nations radio network has been established and an eight-seater aircraft leased. The following section provides more information on the planned supportive activities in 1992 together with their proposed budgets.

## 1. Logistics

UNILOG/LUNA perform the indispensable function of providing transport, storage facilities and logistic assistance to United Nations agencies working in Afghanistan. Operational bases have been set up in Kabul, Mazar-i-Sharif, Peshawar and Quetta, where transport arrangements are made for essential items, such as food and medicine.

UNILOG/LUNA function as a clearing and forwarding agent, principally relying on existing local agents and private commercial transport. Extensive use has been made of private Afghan transporters for deliveries of supplies. They are able to reach most parts of Afghanistan, and have been found to be reliable and resourceful. The UNILOG/LUNA operational bases in Kabul, Mazar-i-Sharif, Peshawar and Quetta are equipped with important storage facilities. Several advance bases in other locations in Afghanistan also have storage facilities of varying capacity and quality. UNILOG also has a fleet of 114 trucks in operational readiness to respond to mass repatriation or major emergency relief situations. During the period January and September 1991, UNILOG transported 30,000 MT of commodities. LUNA provided transport for essential food commodities to the provinces of Badghis, Baghlan, Balkh, Faryab, Jowzjan and Samangan.

UNILOG/LUNA operations have in the main been carried out without major incidents. No serious security problems have so far been experienced, a result of the care taken in the choice of routes and private transporters. Caution and tact have been exercised in the use of silos and storage facilities in Afghanistan to avoid losses through pilfering or undue pressures on the United Nations for the release of commodities. The recent increases in transport costs, mainly due to fuel shortages, have affected UNILOG/LUNA operations. As this situation is expected to continue, a cash component to cover internal transport costs of in-kind contributions becomes increasingly essential.

UNHLOC/LUNA's activities in 1992 will continue essentially unchanged. Emphasis will be placed on the improvement of storage facilities in Afghanistan, especially in Mazar-i Sharif. Rubbhall storage tents will be erected and commodity management provided in other important activity locations. Security permitting, some 50,200 MT of wheat, wheat seeds and other repatriation items will be transported. The budget for these activities is shown in Chapter 2 on Food Aid.

### 2. United Nations Radio Network

As at January 1991, there were nearly 100 HF radios in the field network, several sitor stations, a couple of satellite telephones and hundreds of VHF sets operated by various United Nations missions and teams inside Afghanistan. Centralised coordination and management of these facilities had become imperative. Responsibility for this has now been entrusted to UNOCA.

The United Nations radio network project was therefore established in early 1991 to guarantee radio communication services to the United Nations agencies operating in Afghanistan and Pakistan, as well as to provide standard policies and effective technical and operational management of the system. Tasks include the standardization of radio equipment; centralised procurement of radio and spare parts; repair and maintenance of radio equipment in Afghanistan, Iran, Pakistan and Soviet Union (Termez); technical coordination and operational management, such as frequency allocation, signal instructions and operating procedures. These tasks will continue in 1992. UNOCA is to set up a coordinating and management committee to assist it in the various activities.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNOCA | 400 | 50 | 350 |

### 3. Salam 01 Operations

In April 1990 the United Nations leased an eight-seater Beechcraft to move staff and supplies inside Afghanistan and between Kabul and Islamabad. The aircraft has been extremely useful in enabling outreach to accessible areas. In 1991 'Salam 01' was instrumental on two occasions in saving lives when United Nations staff were injured in resistance-controlled zones. The demand on the aircraft has continued to expand beyond scheduled arrangements. UNOCA assumed official responsibility for its management and operational handling in June 1991. The close working arrangement with ICRC, which operates a similar aircraft, and with OSGAP, which operates a DC9 aircraft, has been mutually beneficial.

Despite increased demand on its services, the 'Salam 01' annual operating budget of US$1.1 million will remain unchanged in 1992.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNOCA | 1100 | 95 | 1005 |

### 4. Data Collection

Reliable socio-economic data/information is critical to the successful implementation

of assistance programmes to Afghanistan. The lack of a firm sectoral data and information base is a major problem The UNIDATA Project, which commenced in 1989, has produced provincial profiles, population and price data and several other situation briefs. In addition, UNIDATA in Kabul has developed a computerized data-processing capacity and established several data-bases. By the end of 1992, 10 provincial socio-economic profiles and an operational data base at the provincial and national levels on major sectors of Afghanistan's economy will be made available. Activities for 1992 will include the following: Completion of provincial socio-economic profiles leading to a socio-economic profile at the national level, and sectoral profiles at the national level; maintenance of databases on donors and projects; establishment of a data/information updating methodology, and a Reference Unit focusing on all pre-war and on-going development projects; linkages with target groups and users; creation of a feed-back mechanism on data utilitisation; respond to joint initiatives by users for collation and dissemination of data.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNDP/OPS | 700 | 700 | |

## 5. United Nations Volunteers

The United Nations Volunteers (UNVs) programme in Afghanistan assists United Nations agencies in carrying out relief and rehabilitation activities by providing volunteer experts and professionals in various fields such as health, rural development, vocational training, assistance to the disabled, distribution of basic human necessities, repatriation and cross-border missions. As at the end of 1991 a total of 89 specialists have been assigned to United Nations agencies and bod es in support of a variety of multisectoral projects. Their services are widely appreciated at community and local levels.

The UNV programme will base improvement and expansion in 1992 on the considerable knowledge and experience gained in its three years with Operation Salam, taking into account the recommendations of a recent survey and assessment made by a UNV evaluation mission.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNV | 1841 | 1700 | 141 |

## 6. United Nations Presence in the Field

Since 1990 UNOCA has been establishing operational support centres in both government- and resistance-controlled areas. So far eight small centres have been set up, in Badakhshan, Bamyan, Ghazni, Helmand, Herat, Kandahar, Kunar and Paktika provinces. Larger operational centres have been established at Mazar-i-Sharif, Herat and Faizabad. As part of a process whereby UNOCA-established operational support centres are handed over to United Nations implementing agencies, the centre at Mazar-i-Sharif has already been handed over to UNDP and arrangements will be made for the centre at Herat to be handed over to an appropriate United Nations agency as soon as the security situation allows. These centres provide the permanent presence of United Nations staff, the close contact with local communities and the regular

required monitoring of projects.

In 1992 UNOCA will continue to establish operational support centres to support programmes and projects in areas and provinces previously inaccessible to major operations, in order to establish and maintain regular working relations with local authorities.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNOCA | 500 | | 500 |

### 7. Support for NGO Coordinating Activities

There are many Afghan and international non-governmental organistaions (NGOs) undertaking a wide range of assistance programmes for Afghanistan, funded from various bilateral, multilateral and private sources. Some of the NGOs are based in Afghanistan, others in the neighbouring countries.

Good coordination will both help NGOs to avoid wasteful duplication and overlapping of effort and maximise the impact of their programme activities in the field. Coordination can be helpful in two ways: First, NGOs operating in the same or similar geographic areas of Afghanistan can share information and exchange views and experiences. Second, NGOs which are active in the same sector, can harmonise their approach, including exchanging technical information, train staff, and so forth.

In an attempt to improve coordination, several groups of NGOs have established coordinating bodies, such as Agency Coordinating Body for Afghan Relief (ACBAR), Islamic Coordination Council (ICC), Southern and Western Afghanistan Balochistan Association for Coordination (SWABAC). These are important initiatives which are helpful to the United Nations agencies and other donors in providing a forum for effective coordination with implementing partners.

UNOCA will support these and other similar initiatives, while further developing interactions and consultations among the NGOs and between the NGOs and the United Nations system.

| Executing Agency | Budget | Available (in thousands of US$) | Shortfall |
|---|---|---|---|
| UNOCA | 200 | | 200 |

## RESOURCE REQUIREMENTS FOR SUPPORT PROJECTS

| S/No | Programme Components | Executing Agency | (In thousands of US$) Budget | Available | Shortfall |
|---|---|---|---|---|---|
| 1. | Logistics | WFP | | | |
| 2. | United Nations Radio Network | UNOCA | 400 | 50 | 350 |
| 3. | Salam 01 Operations | UNOCA | 1,100 | 95 | 1,005 |
| 4. | Data Collection | UNDP/OPS | 700 | 700 | - |
| 5. | United Nations Volunteers | UNV | 1,841 | 1,700 | 141 |
| 6. | United Nations Presence in the Field | UNOCA | 500 | - | 500 |
| 7. | Support for NGO Coordinating Activities | UNOCA | 200 | - | 200 |
| | | GRAND TOTAL | 4,741 | 2,545 | 2,196 |

*Asked what kind of assistance she needed to start carpet-making, what type of thread she required, loom sizes, dyes and other accessories, an Afghan woman replied, "Just give me the sheep. I do everything else."*

* * *

*A year into a UNOCA rug-weaving training project in Nimroz Province, a cooperative had been formed employing 100 women and over 30 carpets had been produced, successfully marketed, and profits reinvested. Nimroz was then hit by its worst floods in recent history. UNOCA is now seeking funds to get this cooperative back on its feet.*

# ANNEXES

# Mass Repatriation - A Challenge to the International Community

**Outline of Contingency Plan for Large Scale Repatriation to Afghanistan**

While spontaneous voluntary repatriation to Afghanistan has been taking place for several years, it must be assumed that the restoration of peace would bring an enormous increase in the number of refugees who would return home. The ability of the United Nations and other agencies to facilitate repatriation and to support rehabilitation efforts in Afghanistan would be greatly enhanced. But a massive return of refugees would also impose a major strain on the economy of Afghanistan, and in particular on its ability to feed its population in the first years following the return of refugees.

This annotated outline summarises the key elements of a contingency plan for large-scale repatriation following a resolution of the conflict, a definitive cessation of hostilities, and an end to insecurity. The outline will be used as a framework to revise and update the plans of UNHCR and the other United Nations agencies participating in Operation Salam, in consultation with non-governmental organisations, bilateral aid agencies and the governments concerned.

As in any repatriation, the fundamental principles of voluntariness and non-discrimination would have to be respected. While UNHCR and others will seek to ensure an informed decision, the refugees themselves will decide when they consider return safe and feasible. Most humanitarian assistance provided in Afghanistan will be provided to communities rather than to individuals. Any individual assistance will be based on need, not status. No distinction will be made between the internally displaced, returning refugees, and those who have stayed at home throughout the conflict.

* * *

## I. Basic Assumptions and Operating Framework

### A. Effective government authority

While some time may elapse before a government supported by the majority of the people of Afghanistan is able to exercise its authority throughout the country, basic security in areas of refugee return, including both freedom from armed attack and the maintenance of public order, is a prerequisite for large-scale repatriation.

### B. Open transportation routes

It is assumed that the restoration of peace will bring open roads and safe access to and through Kabul and the provincial capitals, allowing freedom of movement for returning refugees and United Nations staff as well as the unhindered flow of programme supplies into and within Afghanistan.

### C. Return will occur over an extended period

Given the numbers and practical difficulties, refugee repatriation from Iran and Pakistan to Afghanistan will take place over at least two years. To the extent that UNHCR and others can influence the pace of return, it will be matched to the level of preparedness in Afghanistan.

### D. Most refugees living in Pakistan will make their own way home

The majority of the Afghan refugees resident in Pakistan live within twelve hours travel time of their village of origin. Given this fact and the numbers involved, logistical arrangements for voluntary repatriation can most efficiently be made by the

refugees themselves, provided they have the means. Special arrangements will be needed for vulnerable refugees.

**E. Transportation assistance will be required by refugees in Iran**

In view of the longer distances to be travelled, refugess living in Iran will require assistance with transportation.

**F. Displaced persons**

Internally displaced persons are expected to return to their home areas at the same time as refugees, possibly in a shorter period.

**G. A United Nations presence serving every province**

In order to provide the required support, the concerned United Nations agencies will need to establish offices and operational bases in Afghanistan, from which they can cover every province which is affected by the arrival of repatriating refugees or the internally displaced. Where necessary, district offices may also be set up.

## II. Components of the Programme for Large-Scale Repatriation

The basic elements of the repatriation programme have already been established in support of the movements of spontaneous return that have been taking place since 1988. The restoration of peace and security would permit an expansion of United Nations support for repatriation as well as for rehabilitation and reconstruction activities in Afghanistan, and would require changes in certain aspects of the programme, as described below.

The four components of the repatriation programme are a) protection; b) direct assistance to repatriating refugees; c) community assistance at final destination to ensure immediate survival and successful reintegration; and d) support for rehabilitation and reconstruction.

**A. Protection**

The government in place will be asked to provide appropriate, formal guarantees of the safety of repatriating refugees and their treatment on return.

UNHCR will monitor the safety of returnees in accordance with international practice and existing and future agreements with the governments concerned, and intervene with the appropriate authorities as required. In cooperation with those governments, UNHCR will monitor refugee movements along principal routes of return and at major border crossings to verify the voluntary nature of return and to report any problems to the relevant authorities. Upon request, UNHCR will where possible escort convoys of returnees as part of the monitoring programme.

**B. Direct Assistance to Repatriating Refugees**

**1. Repatriation Grant**

The great majority of refugee families in Pakistan are registered with the Government of Pakistan (GOP) and hold UNHCR/GOP ration cards. UNHCR/WFP will continue to provide registered refugees who choose to repatriate with a cash and food grant in exchange for ration cards, to help them meet the cost of repatriation, including transport home and basic needs upon arrival, unless the volume of return makes alternative arrangements more appropriate.

**2. Transportation Assistance**

a. Refugees in Iran are expected to benefit from organised transport to Afghanistan.

b. Within Afghanistan, returnees travelling long distances will continue to be provided subsidised transport through an expanded transit centre network.

c. Refugees in vulnerable situations - the handicapped, families without an able-bodied adult man, isolated women and children - will need assistance designed to meet their particular needs. It is assumed that persons in these categories will remain in their asylum country until organised transport to and reintegration assistance in their home communities can be arranged.

**3. Transit Centres in Afghanistan**

Accommodation, food, water, etc., for most returning refugees while en route will be met through the many private sector chaikhana/hotels which already exist along the main routes of return. The existing network of transit centres will be expanded with UNHCR support to offer accommodation, food and medical services to returnees travelling long distances who avail themselves of United Nations-organised transportation.

**4. Emergency Assistance en route**

Arrangements will be made with other United Nations agencies and NGOs to respond to emergencies that may arise along routes of return, including the provision of health services, emergency shelter, food or water, mine removal and road repair.

**C. Assistance to Returnee Communities**

As far as possible, assistance will be provided in a way that promotes early self-sufficiency and stimulates reactivation of the local economy.

**1. Food Security**

WFP will establish food stockpiles and maintain the capacity to intervene to ensure that both returning refugees and the members of their home communities have access to adequate food until they become self-sufficient. Whether food needs are met through local production, employment, food-for-work, subsidised sale or free rations will depend on local conditions, needs and implementing capacity.

**2. Reintegration Assistance**

Different local conditions and needs as well as varying levels of destruction and depopulation preclude the distribution of a uniform relief package for each returning family or the prescription of a single programme of assistance for each community. United Nations staff for each area will work with local authorities, community representatives, and non-governmental organisations to identify and prioritise needs and to develop the programmes required to meet immediate needs and to facilitate the process of integration.

Requirements to ensure immediate survival may include, in addition to food, temporary shelter, potable water, mine removal, and domestic supplies including cooking fuel. Seed, fertiliser, hand tools, agricultural power, irrigation, construction materials, health facilities, access roads, veterinary services, community organisation, training, schools, community centres, etc., may be provided as required to promote reintegration and self-sufficiency.

### 3. Long-term Rehabilitation and Reconstruction

Rehabilitation activities that are indispensable for the initial reintegration of returnees will be treated as an integral component of the repatriation programme, and included in the Contingency Plan for large-scale repatriation that is being prepared by UNHCR. Responsibility for implementation will remain with the competent agencies participating in Operation Salam. Longer term rehabilitation needs of Afghanistan, including reconstruction needs of returnee areas, will be assessed by UNDP and will not be covered in the repatriation plan.

## III. The Planning Process

While many of the components of the repatriation programme are already being implemented in support of on-going spontaneous return, planning for large-scale repatriation requires updated, detailed surveys of key sectors in order to assess needs, identify available resources, allocate agency responsibilities, and determine actions to be taken (such as advance procurement and prepositioning) and timing. In many cases basic information has already been compiled, but updating and revision will be necessary in light of conditions at the time large-scale repatriation becomes possible.

During the coming months, UNHCR will coordinate the efforts of the agencies participating in Operation Salam to prepare/update surveys, assess needs, compile information and take the necessary action in their sectors of responsibility in order to advance the planning process as far as possible pending conditions conducive to large-scale repatriation movements. Issues to be addressed include:

### A. Routes of Return and Destinations

An analysis of the numbers of returnees expected to utilise each major border crossing point and their likely routes and destinations.

### B. Transportation

A survey of transportation resources in Afghanistan and Pakistan, to confirm availability of trucks/buses/airlift potential to transport people and goods to and within Afghanistan.

### C. Roads

A survey of main transportation routes to ascertain which roads will require immediate repair or upgrading prior to the large-scale movement of people and goods.

### D. Demining

Identify main transportation routes throughout the country which will require demining to facilitate large-scale movements of people; identify those areas where the presence of mines is an obstacle to repatriation.

### E. United Nations Operational Bases

Identify the number, size and location of United Nations field offices.

### F. Procurement, pre-positioning and Storage Facilities

Assess likely need for pre-positioned food and other supplies in each province, and availability and/or need for creation of storage facilities.

**G. Agriculture and Animal Husbandry**

Refine existing information regarding the quantities of agricultural inputs required at the time of large-scale repatriation, and design action plans for procurement and logisitics.

**H. Health**

Update surveys of existing health resources in Afghanistan (and in refugee assistance programmes in Iran and Pakistan) and identify additional health facilities, supplies, and services required to meet the needs of:

i) returnees along the major routes of return and at transit centres; and

ii) home communities as population is augmented by return, including for public health measures.

**I. Water**

Assess need for urgent action to upgrade/repair domestic water supplies where existing facilities are inadequate, and ensure the necessary priority supplies and equipment are available.

**J. Education**

Identify basic educational facilities, personnel and training required to meet the needs of an increased population as refugees return.

**K. Shelter**

Survey areas of expected refugee return to identify those areas where there are either insufficient building materials available or a lack of skilled workers to reconstruct returnees' houses. Identify supply sources or acceptable alternatives and formulate contingency plans to meet needs.

**L. Agency responsibilities and coordination mechanisms**

The allocation of responsibilities among United Nations and international agencies, non-governmental organisations, governments and local entities will have to be determined in close consultation with all concerned, following an assessment of the needs and in light of their respective resources and capacities.

**M. Programme Support**

Determine needs of United Nations system, government and agency counterparts for vehicles, fuel, communication systems, mapping services, etc., in event of large-scale repatriation, catalogue available resources, and propose preparedness measures.

**N. Personnel**

The staffing needs of participating organisations at different stages of the repatriation process should be established and action taken to ensure that these will be met in a timely way.

**O. Costing and Budgets**

The costing of the programme for large-scale repatriation will depend on the situation prevailing when the conditions for implementation are satisfied. The details provided in the 1992 voluntary repatriation programme, if projected, would give a very approximate indication of UNHCR requirements for direct assistance to returnees, but overall needs would be substantially higher than a pro-rata expansion because of the greatly increased scale and scope of the assistance to returnee communities that would be required and possible in the circumstances of a large-scale repatriation.

TOTAL RESOURCE REQUIREMENTS - PRIORITY SECTORS

| Programme Components | Executing Agency | Budget | Available | Shortfall |
|---|---|---|---|---|
| 1. CASH (in thousands of US dollars) | | | | |
| AGRICULTURE | FAO, UNDP/OPS, UNDCP | 33,861 | 10,271 | 23,590 |
| FOOD AID | WFP | 14,187 | 6,160 | 8,027 |
| MINE CLEARANCE | UNOCA | 15,600 | 2,700 | 12,900 |
| HEALTH, WATER AND SANITATION | UNICEF, WHO, UNFPA, UNDCP, UNDCP, UNDP/OPS | 26,728 | 8,532 | 18,196 |
| BASIC EDUCATION | UNESCO, UNICEF, UNDCP, ILO, WHO | 5,196 | 837 | 4,332 |
| VOLUNTARY REPATRIATION | UNHCR | 16,870 | 5,200 | 11,670 |
| | SUB TOTAL | 112,415 | 33,700 | 78,715 |
| 2. FOOD AID (in metric tons) | | | | |
| WHEAT | WFP | 95,000 | 34,000 | 61,000 |
| OIL | WFP | 610 | 610 | - |
| | TOTAL | 95,610 | 34,610 | 61,000 |

| TOTAL RESOURCE REQUIREMENTS - SPECIFIC PROJECTS AND SUPPORT PROGRAMMES | | | | |
|---|---|---|---|---|
| Programme Components | Executing Agency | (in thousands of US$) | | |
| | | Budget | Available | Shortfall |
| **1. SPECIFIC PROJECTS** | | | | |
| Shelter | UNCHS | 4,227 | 1,192 | 3,035 |
| Road Repair | UNDP/OPS | 7,000 | - | 7,000 |
| Services for the Disabled | ILO, UNDP/OPS | 1,240 | 240 | 1,000 |
| Women with Special Needs | UNICEF | 500 | 200 | 300 |
| Children in Especially Difficult Circumstances | UNICEF | 500 | 250 | 250 |
| Field Operation and Emergency Preparedness | UNICEF | 1,000 | 500 | 500 |
| Culture | UNESCO | 302 | 117 | 185 |
| English Language Training | UNESCO | 1,022 | 357 | 665 |
| Management Training | UNDP/OPS | 800 | 550 | 250 |
| | SUB-TOTAL | 16,591 | 3,406 | 13,185 |
| **2. SUPPORT PROGRAMMES** | | | | |
| Logistics * | WFP | | | |
| United Nations Radio Network | UNOCA | 400 | 50 | 350 |
| Salam 01 Operations | UNOCA | 1,100 | 95 | 1,005 |
| Data Collection | UNDP/OPS | 700 | 700 | - |
| United Nations Volunteers | UNV | 1,841 | 1,700 | 141 |
| United Nations Presence in the Field | UNOCA | 500 | - | 500 |
| Support for NGO Coordinating Activities | UNOCA | 200 | - | 200 |
| | SUB-TOTAL | 4,741 | 2,545 | 2,196 |
| | GRAND-TOTAL | 133,747 | 39,651 | 94,096 |

* The budget for these activities is shown under Food Aid.

# ABBREVIATIONS

## Organisations and Agencies:

| | |
|---|---|
| ACBAR | Agency Coordinating Body for Afghan Relief |
| ARCS | Afghan Red Crescent Society |
| ATC | Afghan Technical Consultants |
| CMC | Coordination of Medical Committees |
| FAO | Food and Agriculture Organisation of the United Nations |
| GOP | Government of Pakistan |
| HALO TRUST | Hazardous Area Life Support Trust |
| ICAO | International Civil Aviation Organisation |
| ICC | Islamic Coordination Council |
| ICRC | International Committee of the Red Cross |
| ILO | International Labour Organisation |
| LUNA | Logistics Unit Northern Afghanistan |
| MAP | Mine Awareness Programme |
| MCP | Mine Clearance Programme |
| MCPA | Mine Clearance Planning Agency |
| MCT | Mine Clearance Training |
| MMCU | Mechanical Mine Clearance Unit |
| MSH | Management Services for Health |
| NGO | Non-governmental Organisation |
| OMA | Organisation for Mine Awareness |
| OSGAP | Office of the Secretary General for Afghanistan and Pakistan |
| SWAAD | South West Afghanistan Agency for Demining |
| SWABAC | Southern and Western Afghanistan Baluchistan Association for Coordination |
| UNCHS | United Nations Centre for Human Settlements (HABITAT) |
| UNDCP | United Nations International Drug Control Programme |
| UNDP | United Nations Development Programme |
| UNDP/OPS | UNDP Office for Project Services |

| | |
|---|---|
| UNESCO | United Nations Educational, Scientific and Cultural Organisation |
| UNFPA | United Nations Population Fund |
| UNHCR | Office of the United Nations High Commissioner for Refugees |
| UNICEF | United Nations Childrens Fund |
| UNILOG | United Nations Logistics and Transport Operation |
| UNOCA | Office for the Coordination of United Nations Humanitarian and Economic Assistance Programmes relating to Afghanistan |
| UNV | United Nations Volunteers Programme |
| WFP | World Food Programme |
| WHO | World Health Organisation |

## Others:

| | |
|---|---|
| ARI | Acute Respiratory Infections |
| BVW | Basic Veterinary Worker |
| CDD | Control of Diarrhoeal Diseases |
| CEDEC | Children in Especially Difficult Circumstances |
| CSD | Child Survival and Development |
| EPI | Expanded Programme of Immunization |
| FP | Family Planning |
| HIS | Health Information System |
| IDWSSD | International Drinking Water Supply and Sanitation Decade |
| IMR | Infant Mortality Rate |
| MCH | Maternal and Child Health |
| ORT | Oral Rehydration Therapy |
| PHC | Primary Health Care |
| TBAs | Traditional Birth Attendants |
| U5MR | Under Five Mortality Rate |
| VBECs | Village Basic Education Centres |

Office for the Coordination of United Nations Humanitarian and Economic Assistance Programmes relating to Afghanistan (UNOCA)

**Geneva**

Palais des Nations
1211 Geneva 10
Switzerland
Tel. 7341737
Fax. 7347310
Tlx. 0412909

**Islamabad**

P. O. Box 1809
Islamabad
Islamic Republic
of Pakistan
Tel. 856931
Fax. 851088
Tlx. 0825514

**Kabul**

Wazir Akber Khan Av.
Street Jeem
Building No. 95
Kabul, Republic of
Afghanistan
Tel. 502530
Fax. 502531
Tlx. 0759281

**Tehran**

24, Babak Markazi Av.
Africa Avenue
Tehran, Islamic
Republic of Iran
Tel. 4271058
Fax. 4271057
Tlx. 088222649

**Termez**

Manguzar
UN Office
732 006 Termez
Uzbekistan
USSR
Tel. Termez 27 211
27 213
Tlx. 064116144